

CES SUMMER FAMILY CAMP REGISTRATION FORM

<i>Use this chart to calculate meal costs</i>	ADULTS (Ages 10+)	AGES (Ages 5-9)	AGES (Ages 3-4)	TOTALS
TOTAL NUMBER OF BREAKFASTS:				
TOTAL NUMBER OF LUNCHESES:				
TOTAL NUMBER OF DINNERS:				

TOTAL COST OF ALL MEALS: \$ _____

<i>Use this chart to calculate Housing Costs</i>	TOTAL NUMBER OF NIGHTS	\$5.00 LINEN CHARGE PER NIGHT	\$10.00 WINDOW A.C. UNIT CHARGE PER NIGHT	TOTALS
DOUBLE w/o LINENS (\$25.00 per night)				
TRIPLE w/o LINES (\$30.00 per night)				
QUAD w/o LINENS (\$35.00 per night)				
TENT CAMPING <i>Included with Registration Fee</i>				<i>Included with Registration fee</i>
☺☺☺☺☺☺☺☺☺☺☺☺☺☺☺☺	Total Multi-Family Cabin:	Total Men/Boy Cabin:	Total Women/Girls Cabin:	TOTALS
Cabin Housing (\$8.00 per person per night) <i>Please Fill in that which applies</i>				

TOTAL COST OF HOUSING: \$ _____

<i>Use this chart to calculate CES Registration Costs (see fees)</i>	ADULTS (Ages 18+)	Teen (Ages 13-17)	Children (Ages 3-4)	TOTALS
Total Number Registering per Age Group:				

TOTAL COST OF REGISTRATION: \$ _____

GRAND TOTAL: \$ _____

Christian Educational Service, Inc.
P.O. Box 30336 • Indianapolis, IN 46230
317-255-6189 • Fax 317-255-6249 • E-mail Jesusces@aol.com

Please make checks payable to CES
(You must pay at least 50% of total costs for pre-registration discount)
Amount paid with this registration \$ _____

Full Names of all Adults Registering _____

Full Names & Ages of all Children Attending _____

Address _____

City _____ **State** _____ **Zip Code** _____

Home Phone _____ **Work Phone** _____ **E-mail** _____

Visa/MasterCard/Discover Card#: _____

Expiration Date: _____

Name on Credit Card: _____