

THE MASTER'S WORKSHOP CAMP, INC.

179 Church Camp Lane Robinson, TX 76706
254-662-0441 www.tmwcamp.com
email: mastersworkshopcamp@gmail.com
Like us on Facebook

Registration Form 2019

Check Camp(s)	Date	Camp	Grade Completed in spring 2019	10% Discount If Rec'd by May 15 th	Registration Price
	JUNE 23-28	LEADERS OF TOMORROW	7 TH -12 GRADE	\$198.00	\$220.00
	JULY 7-11	SPORTS CAMP	5 TH -8 TH GRADE	\$189.00	\$210.00
	JULY 14-17	YOUNG SEEKERS	1 ST -3 RD GRADE	\$171.00	\$190.00
	JULY 21-26	DISCOVERERS	4 TH – 6 TH GRADE	\$198.00	\$220.00

Camper Check in starts at 4:30pm on the 1st day. Check out follows a Family Meal on last day – approximately 6:45pm.

At least one-half of the registration fee is due at initial registration unless prior payment arrangements have been made. Contact Program Coordinator at contact info on back of form to make payment arrangements.

___ Check here if interested in scholarship aid that can pay up to one half of a camper’s registration fee.

Camper’s Name: _____
First
Middle
Last

Date of Birth: ___/___/___ Age: _____ Gender: Boy Girl
Month
Day
Year
Circle one

Camper’s T-shirt size – circle one: **Youth:** Small Medium Large X-Large **Adult:** Small Medium Large X-Large XX-Large

Mailing Address: _____
Address
City
State
Zip Code

Contact Phone # _____ Contact Email: _____

Home Church: _____ City: _____ Denomination: _____

School Attended: _____ Grade completed Spring 2019: _____

Camper lives with: (circle one) Both Parents Mother Father Other: _____
(relationship to camper)

Emergency Contact Info: Parent/Guardian #1 Parent/Guardian #2 Other

Relationship to camper: _____
 Name: _____
 Home Phone: _____
 Work Phone: _____
 Cell Phone: _____

Other Forms Required to be completed for each Camper’s registration:
Medical Form, Pick-up Authorization Form/Camper Covenant

Photo/Video Release for Camper named on front of this Registration Form

Please be advised that your child may be photographed and/or video taped during various events during The Master's Workshop camp sponsored activities & events.

_____ YES, I give permission for my child's photograph and/or video to be posted on our camp website and/or online facebook and other social media pages.

_____ NO, my child's photograph and/or video may not be posted on the camp website and/or online facebook and other social media pages.

Parent/Guardian Signature: _____ Date: _____

ATTENTION CHURCHES: If your church is paying for part or all of this camper's registration fee, please have your pastor or church officer fill out and sign the following information:

_____ will be paying for \$_____ of the registration fee
Name of Church Amount

For the camper named on the front of this registration form.

Authorized by: _____ Date: _____
Signature of pastor or church officer

Send completed forms and payments to:

**Donnell Smith
Program Coordinator
179 Church Camp Lane
Robinson, TX 76706**

**Contact Donnell for more information on camp or payment of registrations at
254-662-0441 or by email: mastersworkshopcamp@gmail.com**

DO NOT WRITE BELOW THIS LINE - FOR CAMP USE ONLY:

	<i>Amount</i>	<i>Date</i>	<i>Check #/Cash</i>
<i>Paid with Registration:</i>	\$ _____	_____	_____
<i>Additional Payment Made:</i>	\$ _____	_____	_____
<i>Paid by Church:</i>	\$ _____	_____	_____
<i>Church Name:</i>	_____		
<i>Paid by Sponsor:</i>	\$ _____	_____	_____
<i>Sponsor Name:</i>	_____		
<i>Paid by Scholarship:</i>	\$ _____	_____	_____
Total Paid:	\$ _____	_____	_____