

2017 David Fellowship Gospel Camp 遇見 Registration Form

TIME: April 10-12 2017

Fee: \$160/ per person (minimum deposit\$60)

Deposit: \$_____

Amount Due: \$_____

Name: _____ Gender: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Church/Group: _____ Christ Evangelical Lutheran Church

Participant Signature: _____ Date: _____

☐ Check if you want to join the adventure game course (extra \$20/person)

Adventure course Includes rock climbing, draw bridge and

☐ Check the box if you want the Gospel Camp T-shirt (\$10) SIZE: L ☐ M ☐ S ☐

Answer following question if you are a high school student:

Do you want to apply scholarship for this Gospel Camp?

(Scholarship will deposit to you after you came back from Gospel Camp)

YES: ☐

NO: ☐

Receipt for David Fellowship Gospel Camp 遇見 Registration

April 10-12 2017

Fee: \$160/ per person EXTRA: ☐ T-shirt (\$10) ☐ Adventure course (\$20/person)

Deposit: \$_____

Staff Name: _____

Amount Due: \$_____

Staff Signature: _____

Note: Remember the deposit is not refundable!

Christ Evangelical Lutheran Church

(718) 972-2517

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