

# 2024 Family Camp ~ July 22 – 25

## Registration Form

**PLEASE PRINT CLEARLY AND FILL IN ALL AREAS THAT APPLY**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Home Congregation: \_\_\_\_\_

I am a new camper and would like to be close to the following family or church group \_\_\_\_\_

Names of Adults who will be camping:

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

Name and age/grade of children under 2 yrs. and in 7<sup>th</sup>-12<sup>th</sup> grades who are camping. **\*Pre-register 2 yr. olds - 6<sup>th</sup> grade on back of this form.**

1. \_\_\_\_\_ Age(Grade): \_\_\_\_ ( ) 4. \_\_\_\_\_ Age(Grade): \_\_\_\_ ( )

2. \_\_\_\_\_ Age(Grade): \_\_\_\_ ( ) 5. \_\_\_\_\_ Age(Grade): \_\_\_\_ ( )

3. \_\_\_\_\_ Age(Grade): \_\_\_\_ ( ) 6. \_\_\_\_\_ Age(Grade): \_\_\_\_ ( )

We would be willing to help in one or more of the following area(s) during Family Camp: (Please check)  Recreation

Restroom Cleaning  Trash Pick-up  Offering  Security  First Aid  Grey Water Pick-up

Did you register for a campsite in 2023?  Yes  No

Type of Camper: (not brand) \_\_\_\_\_ Length of Camper: \_\_\_\_\_

Pricing:

1. Tents, Pop-ups and Camper Vans: \$40.00 per lot for the week

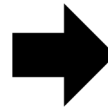
2. Campers/RVs up to 30 feet: \$45.00 per lot for the week

3. Campers/RVs 31 ft. and up: \$55.00 per lot for the week

I have enclosed \$ \_\_\_\_\_. (# of lots \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_)

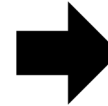
\* No more than 2 lots may be reserved per registration.

Please log on to our website at [www.p2pm.org](http://www.p2pm.org) and read our Family Camp policies and guidelines before signing. If you do not have access to the internet, please call us and we will send a packet to you.



*A Medical Release / Minor Consent Form MUST BE completed for every child age 0-18 years. Please provide email address so a form may be sent to you. You may also print the form from [p2pm.org](http://p2pm.org) and mail or scan the completed form to our office.*

*If you do not want to stand in line at Family Camp, please send us all the forms we need!*



I (print name) \_\_\_\_\_ and my family have read and understand what is expected of us concerning the policies and guidelines implemented by the Trustees of Person to Person Ministries and will adhere to them during our stay at Restoration Acres. We understand that failure to abide by these rules and others implemented hereafter can result in us having to leave. The undersigned shall be solely responsible for and agrees to indemnify, defend and hold harmless P2P, its Trustees, consultants, agents, partners, employees, successors, volunteers, other representatives, and/or any other person acting on its behalf (the "Indemnitees") from and against all claims, suits, actions, judgments, warranties, injuries, damages, losses, costs, expenses, demands, obligations and liability of any kind whatsoever, including but not limited to attorney's fees and costs of defense caused by, arising out of, in connection with, or resulting from any alleged act or omission of P2P or the Indemnitees.

Restoration Acres is located at 5845 St. Rt. 124  
Hillsboro, OH 45133

\_\_\_\_\_  
(signature of registrant/parent/guardian)

**Make checks payable to Person to Person. Send registration and payment to:  
Person to Person Ministries, P.O. Box 39, Hillsboro, OH 45133**

All registrations must be **signed** and included **with payment** before they will be processed.

We will not process registration forms through email until we receive registration payment. Your bank record is proof of your Registration.

**\*\* Pre-registration deadline to guarantee your lot from 2023 needs to be postmarked by June 1, 2024**

### OFFICE USE ONLY

Date Received \_\_\_\_\_ Payment \_\_\_\_\_ Order Number \_\_\_\_\_ Lot Number \_\_\_\_\_

Office Personnel \_\_\_\_\_

## Hillsboro Family Camp Child Registration (age 2 through grade 6)

1. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DOB GRADE M/F NAME (first and last)

**Allergies:**

2. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DOB GRADE M/F NAME (first and last)

**Allergies:**

3. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DOB GRADE M/F NAME (first and last)

**Allergies:**

*A Medical Release Form MUST BE completed for every child age 0-18 years. Please provide email address so a form may be sent to you. You may also print the form from p2pm.org. Mail or scan the completed form to our office. Call 937-840-9072 for more information.*

**Adult(s) who may pick up the children above:**

Adult Name 1 (please print) \_\_\_\_\_ Relationship \_\_\_\_\_

Mobile Phone Number \_\_\_\_\_ OK to text?  Y  N (circle one)

Email Address \_\_\_\_\_

Adult Name 2 (please print) \_\_\_\_\_ Relationship \_\_\_\_\_

Mobile Phone Number \_\_\_\_\_ OK to text?  Y  N (circle one)

Email Address \_\_\_\_\_

***ID bracelets for pre-registered children are included in the information packet that you receive at the front gate as you arrive for Family Camp.***