



## CAMPER REGISTRATION FORM

Campers will not be allowed to stay at camp without this form on file.  
 Campers with special needs are encouraged to contact the Director before coming to camp.

PLEASE CHECK IF YOU ARE A FIRST TIME CAMPER: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ DOB \_\_\_\_\_ Grade this Fall \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_

Home Church: \_\_\_\_\_

T-Shirt Size (Please Select One)		
Youth Small _____	Youth X-Large _____	Adult Large _____
Youth Medium _____	Adult Small _____	Adult X-Large _____
Youth Large _____	Adult Medium _____	Adult XXL _____

### PARENT/GUARDIAN INFORMATION

VERY IMPORTANT: PLEASE FILL OUT ALL THE INFORMATION

PARENT #1 NAME: \_\_\_\_\_ CELL# \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PARENT #2 NAME: \_\_\_\_\_ CELL# \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ CELL# \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

## 2026 CAMP DATES

Use Separate Form for Each Week Attending

Early Bird Ends May 1, 2026

\_\_\_\_ JR. HIGH #1 (6<sup>th</sup>-8<sup>th</sup> Grade)      June 14-19      \$210/\$250

\_\_\_\_ 3<sup>rd</sup>, 4<sup>th</sup>, and 5<sup>th</sup> Grade      June 21-24      \$125/\$155

\_\_\_\_ Overnight Camp      June 26-27      \$60

NAME OF ADULT ATTENDING WITH CAMPER \_\_\_\_\_

\_\_\_\_ SENIOR HIGH (9<sup>th</sup>-12<sup>th</sup> Grade)      June 28-July 3      \$210/\$250

\_\_\_\_ JR. HIGH #2 (6<sup>th</sup>-8<sup>th</sup> Grade)      July 19-24      \$210\*/\$250

\_\_\_\_ LAST CHANCE      August 14-16      \$80

\*Junior High Camp #2 has an early bird cutoff of June 1<sup>st</sup>

### PAYMENT

Cost of Camp (From Above Chart): \$ \_\_\_\_\_

Amount Paid By Church, if Any: \$ \_\_\_\_\_

NAME OF PAYING CHURCH: \_\_\_\_\_

INITIALS FOR CHURCH APPROVAL: \_\_\_\_\_

CAMPER RESPONSIBILITY: \$ \_\_\_\_\_

*Camper Balance Must Accompany Registration Form*

Make Checks Payable To: NEICSC

Mail Form and Check To: NEICSC c/o Warren Curry

19268 Forest Avenue Dumont, Iowa 50625

Refunds may be requested in writing 10 days prior to camp start date minus \$25 fee. Amount may be transferred to another camper or session. NO REFUNDS for camper who leaves camp early unless due to an emergency.

Camper Funds Received _____	Check # _____	Date _____	OFFICE USE
Church Funds Received _____	Check # _____	Date _____	ONLY