

CAMP LONE STAR – CLUB CONNECT 2016-2017 -- DAY CAMP & MOVIE NIGHT REGISTRATION FORM

First Name		Last Name	
Camper's Name:			
Parent or Guardian Name:			
Spouse Name:			
Home Address:			
City:	Email:	I prefer confirmation by postal mail <input type="checkbox"/>	
Zip:	Cell Ph:	Whose cell phone is this?	
Telephone numbers -	Work:	Home:	
Camper's Birthday (month/day/year):		Current grade in school as of 9/2016:	
Camper's Gender	Male: <input type="checkbox"/>	Female: <input type="checkbox"/>	
Home Church and City -	Church Name:	City:	

Dates for camper to attend/receive:	CLUB CONNECT DAY LONG & MOVIE NIGHT (check all sessions you wish to register for)	Amount Due
September 16, 2016	<input type="checkbox"/> Movie Night \$7.00	
October 3, 2016	<input type="checkbox"/> Day Long Program \$27.00 <input type="checkbox"/> After School Participant Day Long Program \$22.00	
October 21, 2016	<input type="checkbox"/> Movie Night \$7.00	
November 18, 2016	<input type="checkbox"/> Movie Night \$7.00	
November 23, 2016	<input type="checkbox"/> Day Long Program \$27.00 <input type="checkbox"/> After School Participant Day Long Program \$22.00	
December 9, 2016	<input type="checkbox"/> Movie Night \$7.00	
February 3, 2017	<input type="checkbox"/> Movie Night \$7.00	
March 13-17, 2017	<input type="checkbox"/> Day Long Program \$142.00 <input type="checkbox"/> After School Participant Day Long Program \$119.00	
	You may add trading post money to the amount due to set up the campers trading post account. Trading post accounts are offered for the SPRING BREAK WEEK only.	
April 7, 2017	<input type="checkbox"/> Movie Night \$7.00	
April 13, 2017	<input type="checkbox"/> Day Long Program \$27.00 <input type="checkbox"/> After School Participant Day Long Program \$22.00	
April 17, 2017	<input type="checkbox"/> Day Long Program \$27.00 <input type="checkbox"/> After School Participant Day Long Program \$22.00	

CANCELLATION POLICY: Registration fees paid in advance may be refunded or transferred **ONLY** if the notification is received in the LOMT Registration office two (2) weeks or more before the start date. Cancellations made less than two (2) weeks may receive a 50% refund/transfer of the amount paid.

Credit card information

Type of card (Visa, MC, Dis, AmXp)	
Credit Card Number	
Expiration Date of Credit Card	
3 or 4 digit card validation number	
Name as it appears on Credit Card	
Cardholders Address (if different than above)	
Amount to charge my credit card:	\$
<input type="checkbox"/> I authorize the balances due the Wednesday before the session begins to be charged to my credit card on that Wednesday.	
<input type="checkbox"/> I do NOT authorize my credit card be charged after this initial payment.	

This form may also be mailed to:
LOMT Registrar
P O Box 457
La Grange, Texas 78945
Phone: 979-968-1657 Fax: 979-968-1658



Registration is due by the Wednesday before the session starts.