



Adult Camp 2023 Registration Form

Adult Camp Week Choice: ___ Aug 14th – 17th (3 nights)

___ Aug 21st – 25th (4 nights)

___ Sept 8th – 11th (3 nights) Hymn Festival

Name(s) _____

Address _____ City _____

State _____ Zip _____ Phone Number _____

Email _____

Emergency Contact Name & Phone # _____

Type of Housing (Please circle 1st choice and 2nd choice)

Housing Type	3 Nights 1 Occupant	3 Nights 2+ Occupants	4 Nights 1 Occupant	4 Nights 2+ Occupants
Lodge Room	\$415	\$345	\$510	\$435
Deluxe Cabin	\$415	\$345	\$510	\$435
Cabin w/ Kitchen	\$385	\$320	\$480	\$405
Cabin w/o Kitchen	\$335	\$265	\$415	\$355
RV/Trailer Site	\$240	\$240	\$320	\$320

___ First Time Discount 20% discount

___ LBI Alumni Discount \$30 discount for 3 nights camp
\$40 discount for 4 nights camp
\$50 discount for 5 nights camp

Name of Roomate: _____

Payment Options:

Make checks payable to Mount Carmel Ministries. PO Box 579 Alexandria, MN 56308

Credit Card # _____ Exp Date ____/____ Sec Code _____

Name on Card (please print) _____

Signature _____

Special Medical Needs: Please provide so we can prepare for your arrival. Thank you! (Mobility, Dietary, Behavior, Allergies, etc.) _____

What church do you attend? (Name and City of church) _____