

Memorial Day Weekend Family Camp

Please fill out the form below, print to PDF, and email to penielranch@hughes.net.

General

FULL NAME

OTHER PARTICIPANTS (WITH AGES IF UNDER 18)

EMAIL

MAILING ADDRESS

MOBILE PHONE

NOTES (DIETARY NEEDS, MEDICAL CONDITIONS, ETC.)

Emergency Contact

EMERGENCY CONTACT'S FULL NAME

EMERGENCY CONTACT'S PHONE

Pricing

CAMP FEE

- Family - \$425
- Couple - \$290
- Single - \$145
- Additional day - \$100 (Family) \$75 (Couple) \$40 (Single)

ROOM FEE

- Stucco Bunkhouse
- Log Bunkhouse
- Family Suite - \$75
- Ranch Suite - \$75

PAYMENT METHOD

Cash

Check

Please direct payments to Faith Frontier Ministries.

AMOUNT DUE

DATE PAID

Waiver and Medical Release

I hereby state that I am 18 years old or older. I hereby release Peniel Ranch and its officers, directors, and agents from any and all civil liability should any accident or injury happen to me or my family while attending this event. In case that I should become unconscious or unable to communicate, I give my permission to be treated by the nearest available medical facility. I understand that I am responsible for my own accident/health insurance.

DATE

SIGNATURE