

PLEASE KEEP THIS SECTION



**JUNIOR WEEK
GRADES 4-6**

July 7-11, 2008
 \$75.00 camp fee, payable first day of camp
 \$10.00 preregistration fee
 \$85.00 total cost: \$10.00 preregistration
 + \$75 camp fee

**BEGINNING AND
ENDING TIMES:**

Monday —
 3:00 PM - 4:30 PM Registration
 4:30 PM Organizational Meeting

**JUNIOR HIGH WEEK
GRADES 6-9**

July 14-19, 2008
 \$80.00 camp fee, payable first day of camp
 \$10.00 preregistration fee
 \$90.00 total cost: \$10.00 preregistration
 + \$80 camp fee

Friday, 5:00 PM —
 camp ends for Junior Week
 Saturday, 9:30 AM —
 camp ends for Junior High

WHAT TO BRING:

Bible, notebook & pen, sleeping bag and pillow, towels, washcloths and soap, toothbrush and toothpaste
 One-piece swimsuit (modest)

Colored T-shirt (for swimming)
 Sports clothes (Girls may wear slacks or dresses - all sports clothes must be modest) All garments must be loose fitting, no tank tops, shorts must be within a hand width of knee

OPTIONAL THINGS TO BRING:

Canteen, offering money, musical instruments, fishing pole, ball gloves
 Secular magazines, personal electronics; T-shirts with rock music, beer or movie themes; ear rings or neck jewelry for boys; knives or other weapons

Detach Here **REGISTRATION FORM**

Detach Here

Name _____ Male () Female ()
 Street _____ Phone _____
 City _____ State _____ Zip _____
 Age _____ Birth date _____ School Grade this fall _____
 Church _____ City _____ Today's Date _____
 Parents or Guardian _____

CHECK YOUR CAMP
 () Junior High Grades 6-9
 () Junior Camp Grades 4-6
 (grades going into)

Camp Use Only

Please: Fill out this form completely and include the \$10.00 preregistration fee. Return this form and above fee to your pastor.
Pastors, send forms to: Pastor Marlon Mielke, First Baptist Church • Box 129 • Milltown, WI 54858

Make checks payable to: Camp Shiloh
 Registration deadline: **Postmarked by June 19, 2008 - Junior**
June 19, 2008 - Jr. High

Cabin Mate? _____

Medical Information:
 *History of Allergies? _____ Diabetes? _____ Rheum, Fever? _____
 Any Chronic Disease or Med. info ? _____
 *(Explanations) _____

Insurance Policy _____ Policy # _____
 Last Ternus Shot given: _____
 Any medication being taken: List names - dosage and reason for taking: _____

I authorize the medical personnel at Camp Shiloh to give any attention deemed necessary to: _____

 Name of Camper

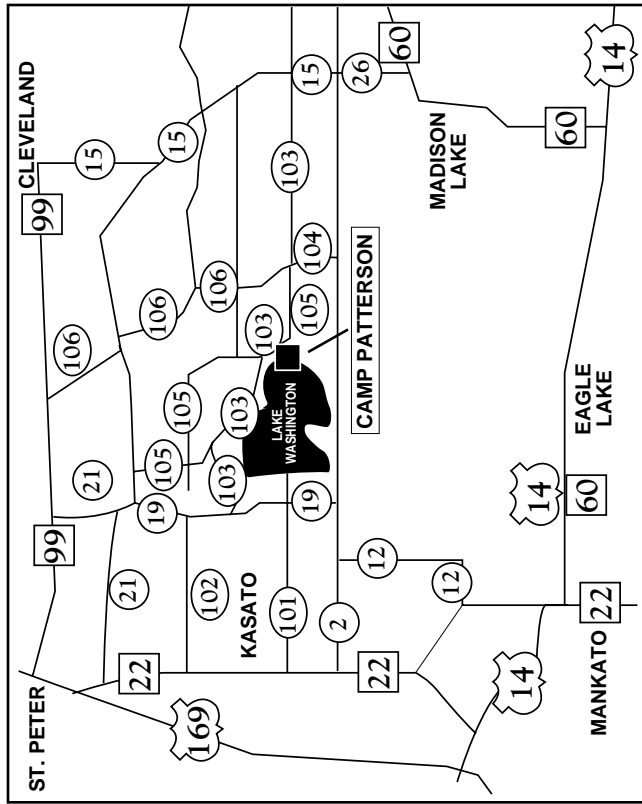
During the week of: _____
 I also give permission for non-prescription medication to be given for minor illnesses, at the nurse's discretion.

 Signature of Guardian

 Date

*Please send meds to camp in original bottles with instructions on them.





**FOR MAIL TO CAMPERS
DURING WEEKS OF CAMP:**

Camp Shiloh
C/O Camp Patterson
5050 Patterson Road
Madison Lake, MN 56063

MAP TO CAMP SHILOH

(507) 243-4550
Phone in camp kitchen

(507) 931-8814

Ask for Allen or Joanne Starke
Leave message for Camp Shiloh

**FOR A GREAT
WEEK OF...**

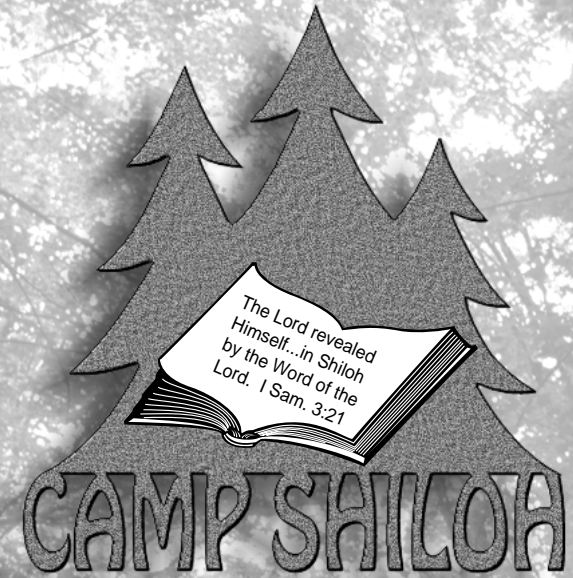
- **SPIRITUAL
CHALLENGE &
BIBLE INSTRUCTION**
- **FUN ACTIVITIES &
SPORTS EVENTS**
- **GOOD FOOD &
NEW FRIENDS**

COME TO

CAMP SHILOH

Held at Camp Patterson
in Madison Lake, MN 56063
5050 Patterson Road

**Summer Camp
2008**



JUNIOR CAMP

July 7-11, 2008
Camp Dean:
Pastor Mark Fish

JUNIOR HIGH CAMP

July 14-19, 2008
Camp Dean:
Pastor Marlon Mielke