

Camp Oasis Registration Form:

Mail to: Box 155 Firth, Ne. 68358

Child's Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Father's Last Name _____ First Name _____

(Guardian)

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ Work Phone _____

Mother's Last Name _____ First Name _____

(Guardian)

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ Work Phone _____

With whom does child reside: Father&Mother _____ Father _____ Mother _____ Guardian _____

Child's Date of Birth ____/____/____ Grade completing for 2010 _____

Male _____ Female _____

Emergency Contact 1:

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ Work Phone _____

Emergency Contact 2:

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ Work Phone _____

Church _____ Pastor _____

Address _____ City _____ State _____ Zip _____

Room Mate Preference: _____

Camp Attending (1st choice) _____ Date _____

Camp Attending (2nd choice) _____ Date _____

Calculate Your Cost:

Cost of Camp: _____ \$ _____

Options/Additions:

Camp Store +\$ _____

*amount remaining will be put in our scholarship fund (no refunds)

Care Package (\$30) +\$ _____

Exclusive T-shirt (\$12) +\$ _____

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Circle Size

Total Options = \$ _____

Camp Discounts *Applicable for **week long** camps only

Sibling Discount (\$25) -\$ _____

Friend Discount (\$25) -\$ _____

Total Discounts \$ (-) _____

Min. deposit is \$50 Deposit Included \$(-) 50 _____

***Balance is due June 1** Balance Due \$ _____

Payment Information

Check/money order included \$ _____ Check # _____

Please do NOT send charge card information through the mail. Please call 402-791-2011

By signature below, you understand that there are inherent risks in any camp program. For your child, who is participating in any of Timberlake Ranch Camp (DBA Camp Oasis) program areas, you indemnify, release and discharge Timberlake and its directors, officers, employees, and agents from liability arising from your child's participation in camp activities. You further authorize use of photographs and/or video and sound recordings of your child during camp for promotional and other camp purposes

Parent/Guardian Signature _____ Date _____