

2017 KIDS CAMP

CAMP # _____

APPLICATIONS PACKAGE SUMMARY SHEET - REQUIRED

ONE Summary Sheet per package of applications is required, NOT one per application. Print clearly, please

Church Name _____ City _____

Address: Street/P.O. Box _____

State _____ Zip _____ Phone _____ Email _____

Senior Pastor _____ Phone _____ Email _____

Children's Pastor/Ldr _____ Phone _____ Email _____

EMAIL ADDRESS TO SEND REGISTRATION CONFIRMATION TO: _____

NOTE: We receive packages of Kids Camp applications and checks representing every possible combination of partial payments, paid-in-full payments, church checks, and personal checks from churches every year. It is often difficult to decipher what the churches (or individuals) have included in the total amount of their check for each camper or each volunteer personnel. Precious time is wasted.

To help ensure faster, more accurate processing of your information, and to help us spot any error in calculation, please supply the following summary of your applications package. These totals will also help you to verify what you have received from parents, what you have sent in to the CE Department, what parents still owe your church, and what you owe upon arrival at camp.

➡ Included in this package are apps for: _____ Campers (children)
_____ Vol. Personnel (includes all pastors, children's pastors/leaders, adults, approved teens, etc.)
_____ Nurse (NO CHARGE)

➡ Include **ONE** check, money order, or online payment receipt to cover **ALL** applications:
(Please do not send any amounts other than those listed below as it defeats the purpose of this form. Thank you!)

_____ campers @ \$70.00 deposit =	\$ _____	
_____ campers @ \$135.00 full pmt. =	\$ _____	TOTAL FOR ALL CAMPERS \$ _____
_____ volunteer personnel @ \$70.00 deposit =	\$ _____	
_____ volunteer personnel @ \$100.00 full pmt. =	\$ _____	TOTAL FOR ALL VOL. PERS \$ _____
_____ working nurse @ no charge		
_____ TOTAL NUMBER OF PEOPLE		TOTAL AMOUNT INCLUDED \$ _____

Payment made by: Check No. _____ Online Transaction Date & No. _____ Money Order No. _____



PLEASE alphabetize Camper apps and VP apps separately. Note at top of each application the \$ amount paid toward that app which is included in your payment.



Friend, **thank you** for all of your hard work in getting your kids and volunteers pre-registered for Kids Camp! Your work is a ministry, a labor of love for God and children. Please pray with us for another wonderful summer of camps!

CHILDREN'S PASTOR/LEADER SIGNATURE: _____

*(Please complete this Summary Sheet, make a copy for your file, and send the original along with applications to the **new address** below.)*

ALABAMA AG CHRISTIAN EDUCATION DEPARTMENT . 5919 CARMICHAEL RD . MONTGOMERY, AL 36117

334.279.7172. EXT. 4 334-279-0016 (FAX) dsharp@adcag.org