



**Fortune
Lake
Lutheran
Camp**

2010 SUMMER STAFF ALUMNI REUNION REGISTRATION FORM

138 Fortune Lake Camp Rd, Crystal Falls, MI 49920
 (906) 875-3697 1(877)JOY 4 YOU Fax 906-875-4829
 registrar@fortunelake.org www.fortunelake.org

Full payment is required prior to participation.

Adult Name _____ Home Church _____

Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email _____

Lodging Preference (Circle one) Emanuel Lodge Retreat Lodge Duplex Cabin

Emergency Contact _____ Relationship _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Email _____

Prices shown are PER DAY PER PERSON

Fees:	Adult	Cabins-\$20	Duplexes-\$25	Emanuel or Retreat Lodge-\$30
	Ages 13-18	Cabins-\$15	Duplexes-\$20	Emanuel or Retreat Lodge-\$25
	Ages 3-12	Cabins-\$10	Duplexes-\$15	Emanuel or Retreat Lodge-\$20

Name _____ Sex _____ Birth date _____ Grade Completed _____ Fee _____

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Spaces in all programs are limited—Registrations are processed by date received.

Arrival Day (Our camp is in the Central Time Zone)

Onsite arrival and check in is **3pm—5pm** on Friday in the Chapel. If you arrive before 3pm, please tour our site and visit our camp store (Canteen).

Thanks to the generous support of our member congregations, W/ELCA's and generous individual donors, we are able to maintain quality facilities, develop dynamic programming and keep fees low.

Refunds

Full Payments are refundable with a \$25 administrative charge until May 1.

In the following circumstances there are no refunds:

- campers leaving early or arriving late
- campers sent home early
- cancellation less than one week prior to program start date
- "no shows"

Change order fee

Any change of date or lodging for confirmed registrations will incur a \$25 processing fee.

Amount of Camp \$ _____

Check made payable to FLLC in the amount of \$ _____

Visa MC Discover Amount billed \$ _____ Credit Card # _____ - _____ - _____ Exp Date _____

For office use: Date Recd _____ Medical Form _____ Amt Due _____ Week _____ Check Writer _____ Check # _____
