

BMA of Oklahoma State Youth Camp Registration

Name of Church:

City:

Adult Sponsor:

Please make checks payable to BMA of Oklahoma Youth Ministries.

Age	Male	Female	Registrar Section	
Below 1 st Grade	_____	_____	(Please do not fill out this box)	
1 st -3 rd Graders	_____	_____	Number of campers x \$110	_____
4 th -6 th Graders	_____	_____	Partial Camper Fees	_____
7 th -8 th Graders	_____	_____	\$15 per night & \$5 per meal	
9 th -10 th Graders	_____	_____	Children Fees	_____
11 th -12 th Graders	_____	_____	Total Fees	_____
Young Adults	_____	_____	Additional Church Offering	_____
Adults	_____	_____	Total Amount Received	_____
Sub-Totals	_____	_____		
Total	_____	_____		

Explanation of partial fees and number of partial campers: