

# REGISTRATION

CAMP MEETING - AUGUST 9-11, 2024 - TRINITY PINES  
REGISTRATION DEADLINE: JULY 26, 2024 | LATE FEE: \$20

Name(s) \_\_\_\_\_

Children's Names & Ages \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Home Church \_\_\_\_\_

Email \_\_\_\_\_

Food Allergies?  Gluten  Dairy  Nuts  Other \_\_\_\_\_

## ACCOMMODATIONS

Please mark nights you will stay at camp:  Friday  Saturday

Indicate housing preference below. Priority given to full-weekend participants. **Housing preference not guaranteed.**

**Cost \$40/night**

- Cottage Room** (Sleeps 6 in Queen Bed/Bunk Beds; Main Level Restrooms en suite)
- Lodge Room** (Sleeps 12 in Bunk Beds; Restrooms shared w/ other Lodge Room)
- Conference Center Room** (Sleeps 14 in Bunk Beds; Restrooms in Conference Center hallway)

**Cost \$30/night**

- RV Park in Aspen Valley** (South End of Property)  30 amp  50 amp Length \_\_\_\_\_

**Cost \$20/night**

- Bunkhouse** (Sleeps 12 in Bunk Beds; Restrooms available in Lodges)
- Camp Site** (Bring your own tent; Restrooms available in RV Park)

**No Housing Needed** at Trinity Pines

TOTAL HOUSING FEES: \_\_\_\_\_

## MEALS

Adult (13 yrs & up) \$12/meal | Child (3-12 yrs) \$9/meal | Toddlers (Under 3yrs) Free

Please mark meals and how many adults, children, and toddlers.  **No Meals Needed** at Camp

**FRIDAY DINNER** Adults \_\_\_\_\_ Child \_\_\_\_\_ Toddler \_\_\_\_\_ \$12 x \_\_\_\_\_ + \$9 x \_\_\_\_\_ = \$ \_\_\_\_\_

**SAT BREAKFAST** Adults \_\_\_\_\_ Child \_\_\_\_\_ Toddler \_\_\_\_\_ \$12 x \_\_\_\_\_ + \$9 x \_\_\_\_\_ = \$ \_\_\_\_\_

**SAT LUNCH** Adults \_\_\_\_\_ Child \_\_\_\_\_ Toddler \_\_\_\_\_ \$12 x \_\_\_\_\_ + \$9 x \_\_\_\_\_ = \$ \_\_\_\_\_

**SAT DINNER** Adults \_\_\_\_\_ Child \_\_\_\_\_ Toddler \_\_\_\_\_ \$12 x \_\_\_\_\_ + \$9 x \_\_\_\_\_ = \$ \_\_\_\_\_

**SUN BREAKFAST** Adults \_\_\_\_\_ Child \_\_\_\_\_ Toddler \_\_\_\_\_ \$12 x \_\_\_\_\_ + \$9 x \_\_\_\_\_ = \$ \_\_\_\_\_

**SUN LUNCH** Adults \_\_\_\_\_ Child \_\_\_\_\_ Toddler \_\_\_\_\_ \$12 x \_\_\_\_\_ + \$9 x \_\_\_\_\_ = \$ \_\_\_\_\_

## PAYMENT

**CASH ENCLOSED**  **CHECK ENCLOSED** (payable to Trinity Pines)  **CREDIT CARD** (Discover, MC, AmEx, VISA)

Name on Card \_\_\_\_\_

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_ TOTAL CHARGED: \_\_\_\_\_

**SEND FORM TO:** Trinity Pines | 349 Cabarton Rd | Cascade, ID 83611  
**QUESTIONS?** Contact Lois at 208-382-6200 or email [lois@tpines.org](mailto:lois@tpines.org)  
**ONLINE REGISTRATION PRINTABLE AT:** [www.tpines.org/camp-meeting](http://www.tpines.org/camp-meeting)

### OFFICE USE

Date \_\_\_\_\_

Ck # \_\_\_\_\_

Amount \$ \_\_\_\_\_

GL  Mem