

Baptist Youth Camp of the Ozarks

Pre-Registration Form

Junior Camp 2012

Please submit this form to the Camp Registrar no later than June 15, 2012.

Snail Mail: Pastor Joe Decker
928 S. Market Ave.
Springfield, MO 65806

Email – jdecker417@yahoo.com

Church Name _____

Anticipated Camp Numbers:

Note: Changes in the following numbers are expected. Major changes may affect where the group will be housed.

of Male Campers _____ # of Female Campers _____

of Male Counselors _____ # of Female Counselors _____

of Male Non-Participants staying in the dorms _____

of Female Non-Participants staying in the dorms _____

Housing Preference:

Note: Housing will be distributed on a first response/first assigned basis. Efforts will be made to accommodate each Church's wishes. However, Camp Registrar will have final say as to the location where each Church group will be housed. The Camp Registrar will notify the Contact Person listed below of your Church's housing locations prior to camp. Thank you in advance for your cooperation.

Girls _____

Boys _____

Contact Person _____ Email _____

Phone # _____