



Registration

Mail, fax, or email completed form to:

Camp Friedenswald
15406 Watercress Way
Cassopolis MI 49031-9532

Fax: (269) 476-9745

Email: program@friedenswald.org

1. Select Your Camp

- | | | | |
|--------------------------|--|-------|--|
| <input type="checkbox"/> | Women's Retreat September 25-27 | \$150 | |
| <input type="checkbox"/> | Men's Retreat October 16-18 | \$150 | <i>Full payment is due on arrival.</i> |
| <input type="checkbox"/> | Art Retreat October 16-18 | \$130 | |
| <input type="checkbox"/> | Crafting Retreat November 4-6 | \$130 | |
| <input type="checkbox"/> | Quilting Retreat November 4-6 | \$130 | |

**Co-hosted with Mennonite Central Committee*

2. Enter Camper Information

Camper First Name: _____ Camper Last Name: _____

Sex: _____ Birthdate (MM/DD/YY): ____/____/____ Phone: _____

Email: _____

Street Address: _____

City/State/Zip: _____

Has anyone in you family ever attended a Camp Friedenswald retreat? Yes No

Emergency Contact Name: _____

Relationship to Camper: _____ Phone: _____

I would like the Medical & Release Form* mailed emailed

**All campers must have these forms completed when they arrive.*

Need-based scholarships are available to all summer campers. To apply call (269) 476-9744.

Questions? Email program@friedenswald.org or call (269) 476-9744