



# Eagles Camp 2016 Registration

Personal Details			
Surname		Name	
D/O/B		Age	
Contact No.	(Cell)	(Home)	
Gender	Female <input type="checkbox"/>	Male <input type="checkbox"/>	
Address			
Parents Details			
Please fill in this section if you are under the age of 18 years			
Father's name & surname		Contact no.	
Mother's name & surname		Contact no.	
Church Details			
Name of church			
Name of pastor		Name of youth leader	
Are you involved in your church?			Yes/No
If yes, please specify			
Transport			
Do you require transport to the following: please tick			
1. Church Building	Yes <input type="checkbox"/> No <input type="checkbox"/>	2. Campsite	Yes <input type="checkbox"/> No <input type="checkbox"/>
Dietary requirements			
Please mark the box relevant to your dietary requirements			
Vegetarian <input type="checkbox"/>	No Pork <input type="checkbox"/>	No Red meat <input type="checkbox"/>	
If you are allergic to any food, please specify below			
Please note that Camp fee is R700			
Payments & deposits can be made to:			
Signature		Date	
Banking details	Standard Bank	Reference:	Camp, name, surname
Eagles Youth Club	Acc. No. 257408207		