



# FREEZE OUT 2017

Listen to meaningful messages from Ken Rudolph, Tony Tice, or Joel Wayne and worship with the Cedarville University worship team, HeartSong. While you're here, don't forget to go for a ride on our tubing trails, play in the snow, or warm up in the Red Canoe with a hot chocolate. Sign up today!

**\*\$40 DEPOSIT DUE WITH REGISTRATION**

**For grades 6-12**

<input type="checkbox"/> <b>Session 1 (Jan 20-22: Ken Rudolph)</b> By Jan 16 Student \$139   Leader \$119 Jan 17 - 20 Student \$149   Leader \$129	<input type="checkbox"/> <b>Session 2 (Feb 3-5: Ken Rudolph)</b> By Jan 30 Student \$139   Leader \$119 Jan 31 - Feb 3 Student \$149   Leader \$129	<input type="checkbox"/> <b>Session 3 (Feb 10-12: Ken Rudolph)</b> By Feb 6 Student \$139   Leader \$119 Feb 7 - 10 Student \$149   Leader \$129
<input type="checkbox"/> <b>Session 4 (Feb 17-19: Tony Tice)</b> By Feb 13 Student \$139   Leader \$119 Feb 14 - 17 Student \$149   Leader \$129	<input type="checkbox"/> <b>Session 5 (Feb 24-26: Joel Wayne)</b> By Feb 20 Student \$139   Leader \$119 Feb 21 - 24 Student \$149   Leader \$129	<b>REGISTER ONLINE!</b> <b>WWW.LAKEANNCAMP.COM</b>

Leader  
 Grade \_\_\_\_\_  
 Male  
 Female

Student Name \_\_\_\_\_ Sponsoring Church Name and City \_\_\_\_\_

Parent/Guardian Name #1 \_\_\_\_\_ Parent/Guardian Name #2 \_\_\_\_\_

Email Address #1 \_\_\_\_\_ Email Address #2 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Payment Method:**  Check  Visa  Mastercard  Discover  Amex Amount: \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_ / / \_\_\_\_\_ Expiration Date \_\_\_\_\_ 3-digit Security Code \_\_\_\_\_

## STUDENT ACCOMMODATION AND DIETARY INFORMATION

Does the student need any special accommodations to participate in activities?  Yes  No  
If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does the student have any dietary allergies?  Yes  No  
If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

## PARNT/GUARDIAN SIGNATURE

*I certify the above student has my permission to attend this retreat and participate in all activities. I also realize that my student's picture or testimony may be used in the promotion of Lake Ann Camp.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Staff Use Only

Rcv'd \_\_\_\_\_ Payment \_\_\_\_\_ Initials \_\_\_\_\_