

LYM Camp Application 2019  
Camp Sherwood Forest, Cuivre River State Park, Troy MO July 21 – 26, 2019

**Applications must be received by July 11, 2019**

Please Print Clearly

\_\_\_\_\_  
Last Name First Name Home Phone:

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

\_\_\_\_\_  
Camper's E-mail Camper Social Networking:

\_\_\_\_\_  
Birthday \_\_\_/\_\_\_/\_\_\_ Sex: Male \_\_\_ Female \_\_\_ Grade Fall 19 (Circle one) 9 10 11 12 13

\_\_\_\_\_  
Church You Attend Denomination

\_\_\_\_\_  
City & State

\_\_\_\_\_  
Are you a confirmed member of Lutheran Church Missouri Synod? (Circle One) Yes No

\_\_\_\_\_  
Medical Conditions

\_\_\_\_\_  
List Any Food Allergy

\_\_\_\_\_  
Cabin-mates (Limit 3)

\_\_\_\_\_  
Custodial Parent Name Address

\_\_\_\_\_  
City State Zip Phone

\_\_\_\_\_  
Other contact numbers

\_\_\_\_\_  
Father's Name Mother's Name

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

\_\_\_\_\_  
Cell Phone Cell Phone

\_\_\_\_\_  
Email Email

\_\_\_\_\_  
**Other Contact** Relationship

\_\_\_\_\_  
Home Phone Cell Phone

By signing this application, I give my son/daughter permission to attend camp and give Lutheran Youth Ministries, its successors and assigns, permission for the release of pictures and video footage of my daughter/son for presentation and promotional purposes.  
**Custodial Parent/Guardian Signature** \_\_\_\_\_

Make checks payable to Lutheran Youth Ministries. Mail application to LYM c/o Robert Milkert, 628 Burroughs Avenue, Collinsville, IL 62234.  
Applications postmarked by June 21, 2019, \$135.00. Postmarked June 22 thru July 11, \$155.00 Deposit of \$50.00 (or payment in full) is due with application. **If paying only deposit any remaining fees are due by July 11, 2019.**  
Financial assistance is available upon request.