

FOR OFFICE USE

FOR OFFICE USE ONLY

Postmark Date ____ / ____ / ____ Lodging Assignment _____	<b>Reg. Form Signature(s):</b> Camper _____ Parent/Guardian _____ (if applicable) Pastor _____	<b>Staff Position Approved:</b>
<b>Payment Record:</b> \$ _____ Cash \$ _____ Pers. Ck. # _____ Balance Due \$ _____ (if applicable) \$ _____ Cashier's Ck. # _____ \$ _____ Church Ck. # _____ A/C Amt. Pd. \$ _____ (if applicable) \$ _____ Money Order # _____	<b>Med. Form Signature(s):</b> Camper(s) _____ (if 18 yrs. old and up) Parent/Guardian _____ (if under 18 yrs. old)	<b>Background Check Received:</b> Yes: _____ No: _____
		<b>Miscellaneous Notes:</b>

## PA DISTRICT, U.P.C.I. CAMP STAFF/DISCOUNTED POSITIONS REGISTRATION FORM July 13-17, 2026

A separate Registration Form and Medical Emergency Form must be completed for each adult applicant. (Note: You DO NOT need to fill out a Family Camp Registration Form along with this one.) \*\*\***Note: If you are desiring to work with campers under the age of 18 you will be required to have a State Police Criminal Record Check and a Child Abuse History Clearance. Once you have your clearances, we will need a copy for our files. The Charges for the Clearances are \$10.00 each and will be your responsibility. Forms are attached.**

**CAMP STAFF AND OTHER DISCOUNTED POSITIONS (mark the category you fall under):**

- PA District Board Member, Board Member spouse, Board Member child (under the age of 18)
- PA District Sunday School Director, Sunday School Director spouse, Sunday School Director child (under the age of 18)
- PA District Sunday School Secretary, Sunday School Secretary spouse, Sunday School Secretary child (under the age of 18)
- PA District Hyphen Director, Hyphen Director spouse, Hyphen Director child (under the age of 18)
- PA District Youth Committee Member, Committee Member spouse, Committee Member child (under the age of 18)
- PA District Home Missionary, Home Missionary spouse, Home Missionary child (under the age of 18)
- Other Camp Staff Position \_\_\_\_\_ (Print requested position. EXAMPLE: Jr. Camp Counselor)

**I WILL BE ATTENDING THIS CAMP:**     Family Camp     Hyphen Camp     Sr. Camp     Jr. Camp

**PERSONAL INFORMATION (please print):**

Name \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_  
 Email \_\_\_\_\_@\_\_\_\_\_.\_\_\_\_\_ Home Phone ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Mobile Phone ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**CHILDREN OF DIST. BOARD, SUN. SCH. DIR./SEC., HYPHEN DIR., YOUTH COMMITTEE OR HOME MISSIONARIES:**

List ALL your children (ages newborn through 17 years) - even if they are registered in Jr., Sr., or Hyphen Camp. Be sure your children who registered in those camps have completed the appropriate registration form for the camp they are enrolled in. On that registration form in the "MISCELLANEOUS INFORMATION" section, explain that your child should receive the discounted price. Disregard the rate listed and only pay the rate listed on this form under "RATES AND LENGTH OF STAY."

Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_  
 (if applicable)  
 Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_  
 (if applicable)  
 Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_  
 (if applicable)  
 Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_  
 (if applicable)

**CHILDREN OF CAMP STAFF MEMBERS:**

List all children (newborn through 6 years of age) who are lodging with you. The only exception is if your 6 year old is registered in Jr. Camp (DO NOT list children who are registered Jr., Sr., or Hyphen Camp). For rate information on your children read "RATES AND LENGTH OF STAY" on page 2 of this form. Only staff members are eligible for the discount rate - not your children.

Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_  
 (if applicable)

Child \_\_\_\_\_ Male Female Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
(if applicable)

Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_\_  
(if applicable)

Child \_\_\_\_\_ Male  Female  Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_\_  
(if applicable)

**U.P.C.I. PASTOR'S INFORMATION (please print):**

Note: If you do not attend a United Pentecostal Church, you must obtain the signature of the U.P.C.I. Sectional Presbyter where you reside.

Name \_\_\_\_\_ Home Phone # ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Church Location City \_\_\_\_\_, State \_\_\_\_\_

**CHECK-IN/CHECK-OUT:**

Check-in begins Monday, July 13, 2026 at 1:00 pm (**not before**). Check-out is Friday, July 17, 2026 by 2:00 pm.

**RATES AND LENGTH OF STAY:**

**Choose a length of stay option:**

- I will attend camp the entire week (**Sunday night - Thursday night**).  
Below are weekly rate options. After reviewing these options, mark where you would like to stay. Lodging is assigned on a first-come, first-served basis so we cannot guarantee your request, but we will do our best to accommodate you.
- I will attend camp the following night(s):  Mon.  Tues.  Wed.  Thurs.  
Below are weekly rate options. After reviewing these options, mark where you would like to stay. Lodging is assigned on a first-come, first-served basis so we cannot guarantee your request, but we will do our best to accommodate you. To pro-rate your cost, divide the price by five. Then multiply that amount by the number of nights you will be staying.

**Choose your lodging preference:**

- Weekly rate for all camp staff and other discounted positions if staying in a cabin, the small motel unit, or a trailer:**  
**\$50.00** - Please make sure all forms and full payment are postmarked on or before July 6th. These rates include meals in the dining hall (not concession stand snacks), lodging, A.C., and all camp sessions. Do not mail any forms or payments after July 6th - see "MAILING INSTRUCTIONS" below for further instructions.  
Cabin, small motel, trailer child rates for children of Dist. Board, Sun. Sch. Dir./Sec., Hyphen Dir., Youth Com., Home Missionaries: Newborn babies under 2 years of age are **FREE** and meals in the dining hall (not concession stand snacks) are included. Children 2-17 years of age are **\$50.00** no matter which camp they are registered in. Meals in the dining hall (not concession stand snacks) are included in this price.  
(NOTE: We will allow children 6-17 years of age with medical conditions or disabilities which require parent/guardian assistance to stay with you at the rate of **\$50.00/week**. Please describe the medical condition under "MISCELLANEOUS INFORMATION" below.)  
Cabin, small motel unit, or trailer child rates for Other Camp Staff Positions:  
Newborn babies under 2 years of age are **FREE** and meals in the dining hall (not concession stand snacks) are included. Children 2-6 years of age are **\$80.00**. Meals in the dining hall (not concession stand snacks) are included in this price. If your 6 year old child chooses to attend Jr. Camp instead of staying with you in Family Camp, you will need to pay full price (**\$160.00**) for that child.  
(NOTE: We will allow children 6-17 years of age with medical conditions or disabilities which require parent/guardian assistance to stay with you at the rate of **\$160.00/week**. Please describe the medical condition under "MISCELLANEOUS INFORMATION" below.)

- Weekly rate for all camp staff and other discounted positions if staying in your personal R.V. or tent:**  
**\$50.00** - Please make sure all forms and full payment are postmarked on or before July 6th. These rates include meals in the dining hall (not concession stand snacks), lodging, A.C. (for those in R.V.'s), and all camp sessions. Do not mail any forms or payments after July 6th - see "MAILING INSTRUCTIONS" below for further instructions.  
**Each additional adult in an R.V. or tent:**  
**\$25/person** for the week whether they are staff or non-staff. Meals in the dining hall and concession stand snacks ARE NOT included in this price. Meal tickets can be purchased at the registration office (\$5.00/meal). (Note: if they are serving in a Camp Staff Position, their meals in the dining hall WILL BE included.)  
Personal R.V. or tent rates for children of Dist. Board, Sun. Sch. Dir./Sec., Hyphen Dir., Youth Com., Home Missionaries: Newborn babies under 2 years of age are **FREE** and meals in the dining hall (not concession stand snacks) are included. Children 2-6 years of age are **\$10.00/child** for the week (unless your 6 year old is registered in Jr. Camp - if so, see below rate). Meals in the dining hall (not concession stand snacks) are included in this price. Children 6-17 years of age who are registered in Jr., Sr. or Hyphen Camp are **\$50.00**. Meals in the dining hall (not concession stand snacks) are included in this price.

**(Personal R.V. or tent rates are continued on the next page.)**

(NOTE: We will allow children 6-17 years of age with medical conditions or disabilities which require parent/guardian assistance to stay with you at the rate of **\$10.00/week** for children 2-6 years of age and **\$25.00/week** for children 7-17 years of age. Please describe the medical condition under "MISCELLANEOUS INFORMATION" below.)

Personal R.V. or tent rates for children of Other Camp Staff Positions:

Newborn babies under 2 years of age are **FREE** and meals in the dining hall (not concession stand snacks) are included. Children 2-6 years of age are **\$10.00/child** for the week. Meals in the dining hall and concession stand snacks ARE NOT included in this price. Meal tickets can be purchased at the registration office (\$5.00/meal). If your 6 year old child chooses to attend Jr. Camp instead of staying with you in Family Camp, you will need to pay full price (**\$160.00**) for that child.

(NOTE: We will allow children 6-17 years of age with medical conditions or disabilities which require parent/guardian assistance to stay with you at the rate of **\$10.00/week** for children 2-6 years of age and **\$25.00/week** for children 7-17 years of age. Please describe the medical condition under "MISCELLANEOUS INFORMATION" below.)

**Weekly rates for for all camp staff and other discounted positions if staying in the Byers Conference Center:**

Please make sure all forms and full payment are postmarked on or before July 6<sup>th</sup>. These rates include meals in the dining hall (not concession stand snacks), lodging, A.C. and all camp sessions. Do not mail any forms or payments after July 6<sup>th</sup> - see "MAILING INSTRUCTIONS" below for further instructions. A \$10.00 deposit per key must be paid at check-in. The money will be returned at check-out when you return the key.

- 1 Person** (1 staff member and 0 non-staff members) - **\$190.00**
- 2 People** (1 staff member and 1 non-staff member) - **\$390.00**
- 3 People** (1 staff member and 2 non-staff members) - **\$540.00**
- 4 People** (1 staff member and 3 non-staff members) - **\$690.00**
- 2 People** (2 staff members and 0 non-staff members) - **\$335.00**
- 3 People** (2 staff members and 1 non-staff member) - **\$485.00**
- 4 People** (2 staff members and 2 non-staff members) - **\$635.00**
- 3 People** (3 staff members and 0 non-staff members) - **\$430.00**
- 4 People** (3 staff members and 1 non-staff member) - **\$580.00**
- 4 People** (4 staff members and 0 non-staff members) - **\$525.00**

Byers Conference Center rates for children of Dist. Board, Sun. Sch. Dir./Sec., Hyphen Dir., Youth Com., Home Missionaries:

Newborn babies under 2 years of age are **FREE** and meals in the dining hall (not concession stand snacks) are included. Children 2-6 years of age are **\$40.00/week** (unless your 6 year old is registered in Jr. Camp - if so, see below rate). Meals in the dining hall (not concession stand snacks) are included in this price.

Children 6-17 years of age who are registered in Jr., Sr. or Hyphen Camp are **\$50.00**. Meals in the dining hall (not concession stand snacks) are included in this price.

(NOTE: We will allow children 6-17 years of age with medical conditions or disabilities which require parent/guardian assistance to stay with you at the rate of **\$40.00/week**. Please describe the medical condition under "MISCELLANEOUS INFORMATION" below.)

Byers Conference Center rates for children of Other Camp Staff Positions:

Newborn babies under 2 years of age are **FREE** and meals in the dining hall (not concession stand snacks) are included. Children 2-6 years of age are **\$40.00/week** (unless your 6 year old is registered in Jr. Camp - if so, you will need to pay full price of \$160.00 for that child). Meals in the dining hall (not concession stand snacks) are included in this price.

(NOTE: We will allow children 6-17 years of age with medical conditions or disabilities which require parent/guardian assistance to stay with you at the rate of **\$40.00/week**. Please describe the medical condition under "MISCELLANEOUS INFORMATION" below.)

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

Have you ever been charged with, arrested for, convicted of, or pleaded no contest for any violation of law, other than for a minor traffic violation? Yes  No  If you answered yes, please explain: \_\_\_\_\_

Have you ever been accused of or charged with fraud, deceit, or assault and battery in any legal proceeding? Yes  No  If you answered yes, please explain: \_\_\_\_\_

Have you ever been treated for the use of any controlled substance or addiction to drugs or alcohol? Yes  No  If you answered yes, please explain: \_\_\_\_\_

Have you ever been declared incompetent or insane? Yes  No  If you answered yes, please explain: \_\_\_\_\_

Have you ever suffered from or been treated for mental illness? Yes  No  If you answered yes, please explain: \_\_\_\_\_

Have you ever been accused of or otherwise involved in an incident of child abuse: Yes  No  If you answered yes, please explain: \_\_\_\_\_

Have you ever been the subject of or been involved in any investigation or examination by the PA Department of Human Services or any other social services agency? Yes  No  If you answered yes, please explain: \_\_\_\_\_

**MAILING INSTRUCTIONS:**

Mail your Registration Form, Medical Emergency Form, and payment in full to: Talina Lutz  
60 N. Main St.  
Milroy, PA. 17063

**NO PERSONAL CHECKS** will be accepted this year - **church checks, cashier's checks, and money orders ONLY** (made payable to "PA District Camp"). Cash will be accepted if you pay at the registrar's office on the campgrounds. **DO NOT MAIL CASH.**

**Lodging will not be assigned until payment is made in full.** Please do not mail any forms or money after July 6, 2026. After July 6<sup>th</sup> you will need to bring all forms and payment to the camp registration office and you will need to pay the late registration price as shown above under "RATES AND LENGTH OF STAY."

If you have any questions or concerns, call Talina Lutz, Camp Registrar, at (570)578-9986. **Please DO NOT attempt to make special requests via Social Media. All Request must be listed on the form and will be granted on a first come first serve basis.**

**SIGNATURES:**

**Signature of Camper filling out this form**

*"I have answered all of the above questions honestly and to the best of my ability. I have read and will abide by the camp rules and dress code. I will be obedient and cooperative at all times and I understand that if I violate the rules, the signing pastor will be contacted. I also understand that violations of campground policies may lead to an early dismissal from the campgrounds without a refund."*

Camper \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Signature of Parent/Guardian of all children listed on this form (if applicable)**

*"I have advised my children of all camp rules and their obligation to abide by them. I understand that if they violate the campground policies, they may be dismissed from the campgrounds without a refund."*

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Signature of your U.P.C.I. Pastor**

*"I understand that if the applicant violates the campground policies, it will be brought to my attention and the applicant may be dismissed from the campgrounds without a refund."*

U.P.C.I. Pastor \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**MISCELLANEOUS INFORMATION:**

Use this area to inform us of any special situations that require you to have a refrigerator, stove, shower, or air-conditioning in your cabin, etc. You should also use this area to list any notes to the camp registrar concerning lodging desires such as special cabin requests, another camper you would like to room with, special situations such as a family member who is listed on this form who cannot stay the entire week, or any other special concerns you may have. We cannot guarantee that your needs/wishes will be met, but we will make every effort to accommodate you to the best of our ability.