



Lutheran Schools of Sioux Falls presents

Camp Center Stage 2018



June 4th-15th, Monday-Friday (First Week: 4th-8th, 1pm-4pm; Second Week: 11th-15th, 9am-12noon)

REGISTRATION FORM

THE CAMPER	PARENT/GUARDIAN
CAMPER'S NAME (First/Last)	NAME
DATE OF BIRTH	ADDRESS
GENDER OM OF ENTERING GRADE: O5 O6 O7 O8 O9 O10 O11 O12	CITY/STATE/ZIP
ALLERGIES OR SPECIAL NEEDS:	PHONE (home)(work)
O No	(cell)
O Yes, specifically	EMAIL ADDRESS
Each camper will receive one t-shirt as part of the camp price. Please select a t-shirt size:	QUESTIONS? Contact Austin & Heidi Albers, Camp Directors, at heidialbers.lhssf@gmail.com
O Youth S O Youth M O Youth L O Youth XL	Call: 605-275-2024
O Adult S O Adult M O Adult L O Adult XL	Camp website: http://lutheranhighsf.org/camps
Other (specify)	Drop off or Mail Form and Payment by May 30th to:
PAYMENT	Sioux Falls Lutheran School 308 West 37 th St Sioux Falls, SD 57105
TOTAL COST: \$100	OR
O Cash	Lutheran High School of Sioux Falls
O Check – (Make checks payable to: Heidi Albers)	5000 South Western Ave
	Sioux Falls, SD 57108