

2025 RMD Family Camp Registration Form

Camper Information:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

Registration Type (Check One):

☐ Regular Lodging

☐ RV Site (Full Hookups)

Number of Attendees & Registration Costs:

☐ Single Individual – \$206 (Regular) / \$167 (RV)

☐ Family of Two – \$268 (Regular) / \$229 (RV)

☐ Family of Three – \$381 (Regular) / \$291 (RV)

☐ Family of Four – \$443 (Regular) / \$353 (RV)

☐ Family of Five – \$505 (Regular) / \$415 (RV)

☐ Family of Six or More – \$567 (Regular) / \$477 (RV)

Names of all Attendees you are registering on this application:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Your registration fee includes lodging from Monday night through Wednesday night, as well as meals during your stay.

Campers Must Bring their own Clothing, bedding, towels, and hygiene products.

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Family Pricing & Room Arrangements

- Family pricing applies to families staying in the same room. Separate rooms require separate registrations.
- Largest rooms contain eight single beds (four bunks). Families larger than eight should consider two registrations unless they are willing to share beds.
- Regular lodging uses shared bathroom/shower facilities.

Code of Conduct

- Clothing and attire should be modest in style and fit.
- We prefer that you do not wear sleeveless shirts, halter-tops, or shorts. Women should wear skirts at or below the knee.
- We discourage the use of colored makeup or excessive jewelry (including facial jewelry).
- The use of profanity is prohibited.
- The use of tobacco or alcohol on the campgrounds is prohibited.
- Campers who are found guilty of theft or malicious damage, whether by confession or evidence, will forfeit all privileges and must leave the campgrounds within 12 hours.

More information about camp can be found at <https://rmdupci.org/family-camp>

Local Pastor Approval (Required):

Pastor Signature: _____ Date: _____

Payment Information:

Total Amount Due: \$ _____ ☐ Cash ☐ Check (Payable to Rocky Mountain District UPCI)

Mail Completed Form before May 28th to:

Rocky Mountain District

PO Box 1962

Rock Springs, WY 82902

By signing below, I acknowledge that I have read and agree to abide by the Family Camp guidelines.

Signature: _____ Date: _____