



Young Muslim

YOUTH CAMP 2010

Session – January 16-18, 2010

Wekiwa State Park, Apopka Florida

Use ONE Registration Form per Family. Please print carefully so our staff can register your child correctly

REGISTRATION

PARENT/GUARDIAN NAME

First _____ MI _____ Last _____

Male Female

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Address _____ Apt # _____ City _____ State _____ Zip _____

CAMPER NAME (Please check all that apply):

1. _____ Age _____ Gender _____ T Size _____

2. _____ Age _____ Gender _____ T Size _____

3. _____ Age _____ Gender _____ T Size _____

4. _____ Age _____ Gender _____ T Size _____

CAMPER PICK UP AUTHORIZATION (Parents must list themselves in addition to any other authorized individual.)

1. _____ Phone _____

2. _____ Phone _____

Parent/Guardian Authorization Signature _____ Email _____

Camper Fee - \$100.00 per camper payable to "ICNA"

CHECK # _____ CHARGE: _____ VISA _____ MASTERCARD _____ DISCOVER _____ AMEX

CARD Holder Name _____

CARD # _____ - _____ - _____ EXP _____ / _____ CSI _____

I agree to pay the above total amount according to the card issuer agreement.

CARDHOLDER SIGNATURE _____ DATE _____

Office use only

Fee paid Yes No

Registration Confirmed Waiting

Signature _____



Organized by: **ICNA Florida**
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