

Registration form for ALABAMA CFO

Registration is not complete until registration fees are paid

Year

Name: (Mr., Mrs., Miss, Rev., Dr.) _____

Phone (____) _____

Address: _____ City _____ State _____ Zip _____

Email _____

Birthdate: ____/____/____ ____/____/____

Is this your first CFO? Yes/No

Building preferences: (circle one) Retreat Center Cabin Lodge

Please check this box to request a private room (\$30 fee added)

All children and/or youth accompanying you to camp: (Please circle names of new campers)

*****Children/Youth under 18 must register with a sponsor and have a signed medical release form if not attending with parent.*****

Name	Relationship	Birthdate	M/F	Grade Entering
_____	_____	____/____/____	____	_____
_____	_____	____/____/____	____	_____
_____	_____	____/____/____	____	_____
_____	_____	____/____/____	____	_____

Total amount enclosed \$ _____

Make checks payable to **ALABAMA CFO.**

Mail to: Cherry Brewer, 406 13th ST SW, Alabaster, AL 35007

Email: Register4ALCFO@gmail.com

***If you have any questions, housing requests or concerns, or special needs, please attach to this registration, e-mail, or call.