

Registration Form
Camp Lookout
Summer 2024

Girls Sessions

June 16 - June 21	Olympic	_____
June 23 - June 28	Carnival	_____
June 30 - July 5	Holiday	_____
July 7 - July 12	Beach Bash	_____
July 14 - July 19	Secret Adventure	_____

Boys Sessions

July 21 - July 26	Boys Week 1	_____
July 28 - Aug 2	Boys Week 2	_____

Please accept my registration for Camp Lookout for the week checked above. I have indicated both a first and second choice.

The total cost of attending a week is \$200.00 of which I have enclosed my deposit of \$50.00.

I understand this requested advance is nonrefundable. The remaining \$150.00 will be paid upon arrival at camp.

Name _____ Age _____

Street Address _____

City/State/Zip _____

Phone Number _____

Grade in school (Fall 2024) _____

Parent's e-mail address _____

I would prefer to receive camp confirmation by:

e-mail _____ or Postal Service _____

Checks Payable to: Camp Lookout

Send Registration and payment to:

Karen Schumaker

#8 Oak Dr.

Ft. Madison, IA 52627

(319)470-5330

After June 14, contact Camp Lookout (319)463-5529