

**2010 WINTER BLAST**  
**White Mountain Snow Camps**  
PO Box 599, Rumney, NH 03266  
(603) 786 9504

**Group Information**

Church or Group Name \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Group Leader Information**

Name of Group Leader \_\_\_\_\_

DayTime Phone (\_\_\_\_) \_\_\_\_\_ Home Phone No. (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

Leader's Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Please send confirmation information to** (Check one):  
\_\_\_\_ Leader's Address **or** \_\_\_\_ Group's Address

**Weekend Preference: (Check one)**

____ January 1-3 Family	____ January 29-31 Teen	____ February 26-28 Teen
____ January 8-10 Junior	____ February 5 - 7 Teen	____ March 5 - 7 Teen
____ January 15-17 Junior	____ February 12-14 Teen	____ March 12 – 14 P-Y-O-R
____ January 22-24 P-Y-O-R	____ February 19-21 Teen	

**Juniors Ages 7 – 12    Teen Ages 13 -18**

**P-Y-O-R = Groups "Plan Your Own Retreat" using our staff and facilities.**

**COST**

**Junior Camp - \$115 per person**

**Teen Camp - \$120 per person**

**P-Y-O-R - Call for prices (603) 786 9504**

**Family Camp: adult & teen \$84 each; ages 5-12 \$42; under 5 – free; Maximum \$252 per Family**

- OVER -

**Number of Individuals Registering:**

	# Campers	# Leaders	Total	Office use only Dates / Initials
Males	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Females	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Group Total	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

**Note:** Groups must bring at least one male leader for every 10 guys and one female leader for every 10 girls who register.

**PAYMENT**

Deposit amount enclosed: \$ \_\_\_\_\_  
 Payment amount enclosed: \$ \_\_\_\_\_

**Credit Card Information:**

Please circle one: Visa / Mastercard / Discover

Card # \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Print Name on Card: \_\_\_\_\_ Card Holders' Signature: \_\_\_\_\_

Office use only	Initials
<b>Registration Received</b> ____/____/____	_____
<b>Via:</b> ___ Mail ___ Phone ___ Internet ___ FAX	
<b>Deposit Received</b> ____/____/____	_____
___ Check ___ Credit Card	
<b>Final Payment Received</b> ____/____/____	_____
___ Check ___ Credit Card	
<b>Computer Entry</b>	_____
____/____/____	
<b>Leaders Package Sent</b>	_____
____/____/____	
<b>Final Payment Phone Call</b>	_____
____/____/____	