



2008 *SBCV* Studentz Camp

Student Registration Form: (please photo copy for each student)

Contact information:

Name _____ male female Date of Birth _____

Grade entering in fall of 2008: 6 7 8 9 10 11 12 just graduated

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ Other Phone _____

E-mail _____

T-shirt Size (adult sizes) XXL XL Large Medium Small

Church _____ Church City _____ Church Phone _____

Youth Leader _____

Parent/Guardian names: _____

Please be sure to read and sign Camp Covenant/Medical Release Form

This form may be submitted online at www.sbcv.org/studentz/camp

You may also submit this form via fax 804-270-1834 or by mail to:

SBC of Virginia, 4101 Cox Road, Glen Allen, VA 23060

SBCV Studentz Camp is the official state student camp of the SBC of Virginia and is supported by your gifts through the Cooperative Program.