

CAMPERS FOR CHRIST MINISTRIES
FORM FOR MEMBERSHIP RENEWAL

(Please print CLEARLY and EXACTLY the way you want it in our member database)

Date: _____ Enclosed is \$ _____ for _____ year(s) dues.

Last Name: _____ His: _____ Hers: _____

Street Address / PO Box: _____

Town / City: _____ State: _____ ZIP Code: _____

Home Telephone: (____) _____

Cell Phone(s): His (____) _____ Hers (____) _____

E-mail 1: _____ Email 2 : _____

Preferred Newsletter Delivery (Check One): _____ Email _____ Regular Mail

------(clip here)-----

Mail this form together with your check for \$20 to
Vikki Eady – Membership Chairman
Campers For Christ Ministries
1119 Lauren Crest St. SW, Hartville, Ohio 44632