



2017 Senior High Retreat
NOV 17-18

NAME _____

ADDRESS _____ CITY _____ ZIP _____

EMAIL _____

PHONE _____ AGE _____ GENDER _____

CHURCH / CITY _____

- Registration fee is **\$45**. Please send a check with this form to the District Office:

IOWA DISTRICT EAST - LCMS
1100 BLAIRS FERRY RD
MARION IA 52302-3039

- Students will need to fill out a camp health and photo release form. Bring this with you to camp. The form can be found on our district website: lcmSIDE.org

Questions: Contact the district office Communications & Technology Coordinator, Christina White: Christina@lcmSIDE.org / 319-373-2112



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