



Battle of the Worldviews
2018 IDE Sr. High Retreat
November 16-17, 2018

REGISTRATION FORM

NAME _____

ADDRESS _____

PHONE _____ AGE _____ GENDER _____

EMAIL _____

REGISTRATION TYPE (circle): Youth / Adult Chaperone

Send a check for **\$45** 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 at lcmside.org.

Contact the District Office for more information: pam@lcmside.org
 319-373-2112



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