

# C a m p A n g e l o s 2 0 1 3 ! ! !

**When:** August 18<sup>th</sup>-23<sup>rd</sup> (Sunday through Friday)

**Where:** Camp Angelos on the Sandy River

**Who:** Youth members between ages 9 through 16 are welcome to enroll.

Please note that because of limited accommodations only the first 100 applicants will be accepted. Enrollment is open to all Orthodox Parishes.

**Registration fee:**

Steward of any Orthodox Parish: \$275 per camper - \$200 for each additional family member.

**Registration forms received after Wednesday, July 31, 2013 are subject to a \$100.00 late registration fee.**

**Sorry, no registration refunds - no exceptions**

**ORTHODOX IDENTITY/FELLOWSHIP/NEW FRIENDS/INCREASED FUN/CRAFTS/  
ORTHODOX LIFE DISCUSSIONS/ ATHLETICS/ CAMPFIRE**

If you are interested in being a Camp Counselor and are at least 17 years old please contact:

**Fr. Dimosthenis or George Demas** at 503.234.0468.

**Registration Form:**

| Campers or Counselor Name(s)     | Age | Fall Grade | Gender | T-Shirt Size (Adult), Circle One |        |       |         |
|----------------------------------|-----|------------|--------|----------------------------------|--------|-------|---------|
| 1                                |     |            |        | Small                            | Medium | Large | X-Large |
| 2                                |     |            |        | Small                            | Medium | Large | X-Large |
| 3                                |     |            |        | Small                            | Medium | Large | X-Large |
| Home Address:                    |     |            |        |                                  |        |       |         |
| Parish Name:                     |     |            |        |                                  |        |       |         |
| Email Address:                   |     |            |        |                                  |        |       |         |
| Home Phone:                      |     |            |        | Parent's Cell or Work Phone:     |        |       |         |
| Medical Insurance Carrier:       |     |            |        |                                  |        |       |         |
| Medical Insurance Policy Number: |     |            |        |                                  |        |       |         |
| Parents Signature:               |     |            |        | Date:                            |        |       |         |

Medical/Doctor documents are available in Holy Trinity Cathedral office or at [www.goholytrinity.org](http://www.goholytrinity.org). Campers must have forms ready by the start of camp or else they will not be accepted. No exceptions.

An information packet will be sent to all registered campers after the camp directors have received this form. Note that if you have pre-registered it will still be necessary to complete the registration form.

**Please send this form and registration fee to:**

Holy Trinity Camp Angelos 2013  
3131 Northeast Glisan  
Portland, OR 97232

Please make checks payable to: **Holy Trinity Camp Angelos 2013**  
This form and the registration fee must be received by **Wednesday July 31, 2013.**