

**SOUTHERN PA DISTRICT CHURCH OF THE BRETHREN**  
**JUNE 13 & 14, 2022 WOMEN'S CAMP REGISTRATION ~ Camp Eder, Fairfield, PA**  
**Registration begins Monday at 8:45 a.m. - Retreat begins at 9:30 a.m.**  
**Checkout by 3:00 p.m. Tuesday**

**COST OF MEALS:** VEGETARIAN options for all meals.  
Monday Lunch \$8.00 Tuesday Breakfast \$7.00  
Monday Dinner \$11.00 Tuesday Lunch \$8.00

**COST OF LODGING PER PERSON:**

TREE OF PEACE - \$58.50 (Each room has 1 dbl/2 single beds/1 single trundle & 1 bathroom w/shower - AC)  
SCHWARZENAU - \$32.50 (2 bunk-rooms/each with 8 bunk-beds, 1 bathroom w/2 showers & 2/3 stalls -AC)  
GEIGLEY - \$23.50 (Bunk-beds in upstairs Dorms/A-above office; B-above bathrooms; C-above kitchen)  
LONG HUTS (5) - \$10.00 (Each with 5 beds, bathhouse close by)

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**\*\* REGISTRATION DEADLINE IS MAY 27, 2022 \*\* LATE REGISTRATIONS WILL NOT BE ACCEPTED \*\***

Mail completed form along with your check to:  
Southern PA District COB, 3375 Carlisle Road, Suite A, Gardners, PA 17324  
Make checks payable to: SO PA District COB  
PLEASE NOTE: No Refunds after May 27, 2022

**CHECK ONLY ONE OPTION BELOW**

**DAY GUEST - With Choice of Meals / Beverages Included**      ☐ **VEGETARIAN** options for all meals  
☐ Monday Lunch - \$8.00      ☐ Tuesday Breakfast - \$7.00  
☐ Monday Lunch & Dinner - \$19.00      ☐ Tuesday Breakfast & Lunch - \$15.00  
☐ Monday Dinner Only - \$11.00      ☐ Tuesday Lunch Only - \$8.00  
☐ Lunch Both Days - \$16.00      ☐ Monday Lunch & Dinner & Tuesday Lunch - \$27.00  
☐ Monday Lunch & Tuesday Breakfast & Lunch - \$23.00      ☐ All four Meals - \$34.00

**OVERNIGHT GUEST - INCLUDES LODGING/MEALS/BEVERAGES**

☐ Tree of Peace Lodge - \$92.50      ☐ Schwarzenau Lodge - \$66.50  
☐ Long Hut - \$44.00      ☐ Geigley Lodge - \$57.50      ☐ Dorm A      ☐ Dorm B      ☐ Dorm C

☐ **Check here if interested in doing a craft. Craft to be determined.**  
Cost will be \$5-\$10 which you may bring with you to camp.

Name: \_\_\_\_\_  
Congregation: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Roommate Preference: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_  
Emergency Contact Phone: \_\_\_\_\_  
Total Amount Included: \$ \_\_\_\_\_

**REMINDER:**  
**Did you check ( ) ALL**  
**appropriate boxes on this form?**

**For District Office Use ONLY:**

Received \_\_\_\_\_ Check # \_\_\_\_\_  
Check Amount \_\_\_\_\_ Check Date \_\_\_\_\_