



Old First Reformed United Church of Christ

Urban Service Camp Registration

volunteer@oldfirstucc.org / admin@oldfirstucc.org

Congregation or Group name:

Address:

Group Contact name and phone

Number: _____ Contact email: _____

Contact address if different from Group address:

Preferred dates of service camp, including approximate time of arrival and departure

- - First choice of dates: _____
- - Second choice: _____
- - Third choice: _____

Estimated: Arrival time: _____ --- Departure time: _____

Anticipated Group Size _____ Adult/Youth Ratio (1/4 minimum) _____

Age range of youth participants: _____

Total cost \$ _____

Deposit – amount and date paid \$ _____ Date: _____

Balance – amount and date due \$ _____ Date: _____

(Note: If the balance is not paid in full upon arrival, a 10% service charge will be added to your balance and a new balance will be emailed to the group contact.)

What types of services are you interested in participating in while you are in Philly?

“Where people matter; faith makes sense; and you and the world begin to change...”