

APPLICATION to be a CHRISTIAN SCIENCE PRACTITIONER at CEDARS in 2010
The purpose of CEDARS is: *"To promote the consistent use of Christian Science in joyous, outdoor living"*

Date: _____

Name _____ E-mail (if on-line) _____ When Journal listed _____
(listing required for PAL House service)

Address _____ City _____ State _____ Zip Code _____
 (_____) _____ (_____) _____ (_____) _____
 (A/C) Home Phone (A/C) Business Phone (A/C) Mobile Phone

I would like to be reimbursed by: _____ Travel Expense Reimbursement of \$ _____
 or _____ Full week of Tuition credit for camper of your choice per wk. of your work

List any camper(s) coming with you: _____
 Name _____ School Grade **NEXT** Sept.
 Name _____ School Grade **NEXT** Sept.
 Name _____ School Grade **NEXT** Sept.

Branch Church Membership _____ State _____ Zip Code _____ (_____) _____
 (A/C) Phone

Character

Reference: _____ Name _____ Address _____ (A/C) Phone _____

**Christian Science Teacher
 or patient
 reference:**

_____ Name _____ Address _____ (A/C) Phone _____

Choice of Programs: **Main Camp** **Jr. Leadership** **Travel Program**

Choice of weeks: *It is preferable to sign up for an entire session for JL if possible.*

- | | |
|--|--|
| <input type="checkbox"/> May 28-May 31 (Memorial Weekend) | <input type="checkbox"/> July 10 - 17 (1 st wk, 3rd session) |
| <input type="checkbox"/> June 5 - 12 (Pre-camp) | <input type="checkbox"/> July 17 - 24 (2nd wk, 3rd session) |
| <input type="checkbox"/> June 12 - 19 (1st wk., 1st session) | <input type="checkbox"/> July 24 - July 31 (1st wk., 4th session) |
| <input type="checkbox"/> June 19 - 26 (2nd wk., 1st session) | <input type="checkbox"/> July 31 - Aug. 7 (2nd wk., 4th session) |
| <input type="checkbox"/> June 26 - July 3 (1st wk., 2nd session) | <input type="checkbox"/> Aug. 7 - Aug. 14 (1 week, 5th session) |
| <input type="checkbox"/> July 3 - July 10(2nd wk., 2nd session) | <input type="checkbox"/> Aug. 14 - 20 (1 week, 6 th session, Family Camp) |

Christian Science Practitioners (& Christian Science Nurses) are asked to arrive and depart around noon on the appropriate Saturday.

**The PAL House Christian Science Practitioner's PRIVATE PHONE NUMBER IS:
 (417) 532-6641**

**The J.L "Palace" Christian Science Practitioner's PRIVATE PHONE NUMBER IS:
 (417) 532-5748**

It will be a joy to have you join us in achieving CEDARS purpose of strengthening the understanding, application and love of Christian Science among our young people and families.

**Please send Application to: CEDARS CAMPS, Warren Huff, Executive Director
 (email: director@cedarscamps.org)**

**(November - May) 1314 Parkview Valley, Manchester, MO 63011-4206 (636) 394-6162 Fax (775) 264-6826
 (June - October) 19772 Sugar Drive, Lebanon, MO 65536-7673 PH: (417) 532-6699 Fax: (775) 264-6826**