

**APPLICATION to be a CHRISTIAN SCIENCE PRACTITIONER at CEDARS in 2012**

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.*

- \_\_\_ May 25 – May 28 (Memorial Weekend) \_\_\_ July 7 – 14 (1<sup>st</sup> wk, 3rd session)
- \_\_\_ June 3 – 9 (Pre-camp) \_\_\_ July 14 – 21 (2<sup>nd</sup> wk, 3rd session)
- \_\_\_ June 9 – 16 (1<sup>st</sup> wk., 1st session) \_\_\_ July 21 – July 28 (1<sup>st</sup> wk., 4th session)
- \_\_\_ June 16 – 23 (2<sup>nd</sup> wk., 1st session) \_\_\_ July 28 – Aug. 4 (2<sup>nd</sup> wk., 4th session)
- \_\_\_ June 23 – June 30 (1<sup>st</sup> wk., 2nd session) \_\_\_ Aug. 4 – Aug. 11 (1 week, 5th session)
- \_\_\_ June 30 – July 7 (2<sup>nd</sup> wk., 2nd session) \_\_\_ Aug. 11 – 17 (6 days, 6<sup>th</sup> 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**