

Idaho Conference Camp Meeting Registration Form

June 9 – 13, 2026

Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Home Phone # _____ Cell Phone # _____
 Emergency Contact _____ Phone # _____
(Not at Camp Meeting with you)
 Vehicle License Plate # _____ State _____
 Email _____ I need help with my luggage

Please reserve the days I have checked:

- Full Camp Meeting (Tuesday, June 9 - Sabbath, June 13)
 Tuesday Wednesday Thursday Friday Sabbath

Lodging (Check one):	<u>Per Night</u>	<u>Full Time</u>	<u>Amount</u>
<input type="checkbox"/> Student Residence	\$37	\$108	\$ _____
<input type="checkbox"/> South Dorm	\$35	\$100	\$ _____
<input type="checkbox"/> RV-Water/Elec(10 amp)*	\$28	\$78	\$ _____
<input type="checkbox"/> Tent Site (no utilities)	\$11	\$33	\$ _____
	Total Fees		\$ _____
* Length of RV _____	Deposit Paid		\$ _____
* # of Slide Outs _____	Balance Due		\$ _____
* RV License Plate # _____ State _____			

I have medical training and am willing to assist if needed.

Mail to:

Idaho Conference
 of Seventh-day Adventists, Inc.
 Camp Meeting
 7777 W Fairview Ave
 Boise ID 83704

\$20.00 deposit required to reserve room or space.
 Deposit is nonrefundable after May 22, 2026.

We accept only cash and checks. Make checks payable to Idaho Conference.

Balance is due at check-in.
 A \$5 refundable deposit per key is payable at check-in.

“No Pet Policy”
No animals except service dogs are allowed on campus. Service dogs must be trained to perform a specific task for a disability.

For more information contact:
 Jo-Ann Miller
 Idaho Conference
 208-375-7524 Ext. 114
 Joann.miller@idconf.org

**** Office Use Only – Do Not Write Below This Line ****

	Total Fees	\$ _____
	Deposit (Receipt # _____)	\$ _____
	Balance Due	\$ _____
	Key Deposit (\$15 x ___ # of keys)	\$ _____
	Balance Due	\$ _____
	Payment (Receipt # _____)	\$ _____
	Balance	\$ _____
	# of Keys Returned _____	
	Key Deposit Refunded	\$ _____

Room / Space #	
Last Name	
CHECKED IN	<input type="checkbox"/>