

fall

Crop in the Woods

Cropping—Scrap-Booking—Stamping—Handicrafts

October 23 - 25, 2009

- **\$20 Saturday Only**
- **\$35 Fri/Sat or Sat/Sun**
- **\$50 Friday—Sunday**
- **\$10 *Whole Table** * LIMITED QUANTITY
Minimum 6 foot table

Some of the participants will be sharing their faith and/or a devotional thought from God's Word throughout the weekend and there will be a chapel session on Saturday. The atmosphere will be such that you may want to bring a friend or neighbor to enjoy the fellowship and hear the gospel.

STAYING OVERNIGHT?

Linens are not provided. At least two ladies will be assigned per lodge room. The Dormitory is also available.

THE PROGRAM

Tables will be set up in the dining hall. Coffee and Tea will be available all day.

Each participant will be given one half of an eight-foot table for the weekend. No materials are provided by Camp Horizon, but with your confirmation we will provide information on how to order materials in advance.

Mealtimes will be informal. You can continue to work while you eat. You are also welcome to bring snacks to share.

There will be tables provided for Swapping and Selling of your cropping items.

Name (s):

Roommate Request:

- Friday – Sunday Friday/Saturday Saturday/Sunday
 Saturday Only Lodge Dormitory (2nd Floor)
 Whole Table



CAMP HORIZON
7369 SUNNYSIDE DRIVE
LEESBURG, FLORIDA 34748

info@camphorizon.org
<http://www.camphorizon.org>

PLEASE PAY IN FULL WITH REGISTRATION

The Lodge fills fast - only paid registrations will be scheduled a room.

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\$50 Friday—Sunday

\$10 *Whole Table

This is a change of address or other information

		<input type="checkbox"/> X \$20 Saturday Only	<input type="checkbox"/> X \$50 Friday - Sunday
		<input type="checkbox"/> X \$35 Fri/Sat or Sat/Sun	<input type="checkbox"/> X \$10 WHOLE TABLE
..... <i>Last Name</i> <i>First Name</i>		
List Attendees :			
..... <i>Street Address</i>			
..... <i>City</i> <i>County</i> <i>State</i> <i>Zip Code</i>
(.....) <i>Home Phone No.</i>	(.....) <i>[] Work [] Cell Phone No.</i>		
..... <i>e-mail address</i>	 <i>Assembly / Fellowship / Church</i>	
<i>Amount Enclosed:</i>			
PAYMENT IN FULL IS REQUESTED (Check is preferred)			

Credit / Debit card acceptance is for your convenience only.

We do not wish to encourage you to increase your personal debt.

<input type="checkbox"/> JMC	<input type="checkbox"/> Visa	Name on Card: _____
[A \$5 convenience fee will be added for all credit card payments] AMOUNT		
Credit Card # _____ / _____ / _____ / _____	Expiration Date: _____	
Authorized Signature: _____		

Camp Horizon
7369 SUNNYSIDE DR
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