



2026 Camp Okoboji Ice Fishing Retreat **Registration**

Camp Okoboji
1531 Edgewood Dr
Milford, IA 51351
712-337-3325
camp@campokoboji.org

Family's Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ E-Mail Address: _____

Emergency Contact: _____ Relationship: _____ Phone Number: _____

Family Contact Person: _____ Birthdate: ____/____/____ Cost: _____

Family Member #1: _____ Birthdate: ____/____/____ Cost: _____

Family Member #2 _____ Birthdate: ____/____/____ Cost: _____

Family Member #3 _____ Birthdate: ____/____/____ Cost: _____

Family Member #4 _____ Birthdate: ____/____/____ Cost: _____

Family Member #5 _____ Birthdate: ____/____/____ Cost: _____

Family Member #6 _____ Birthdate: ____/____/____ Cost: _____

Family Member #7 _____ Birthdate: ____/____/____ Cost: _____

Rates

Ages 10+ - \$140 / Ages 3-9 - \$90 / Ages 2 & Under - Free

Total Cost: _____

Home Congregation: _____ City/State: _____

Does Camp Okoboji need to bill your church? _____

Lodging Preference: _____

Registration

I hereby enroll my family to participate in the planned activities of Camp Okoboji's Program, and agree to pay all (or my portion) of any incurred registration fees.

Photo Release

I give my permission for Camp Okoboji to use mine or my child's photo in all publicity.

Family Contact Person Signature: _____ Date: _____