Camp Bluegrass 2024 Registration Form

Camper's Name				
Address				
Phone Number (Home)		Work		
Email Address				
nstrument				
Level (Circle one) Beginner				
F-Shirt (Circle one): S Would like the following accoms Single Occupancy Room Double Occupancy Room	nmodation (Ch n: 5 nights	eck one) _ 6 nights		
RVOff C	ampus			
would like a meal ticket	Yes	No		
If you would like to use a Credit he following information.	Card for the ho	ousing and me	als payment, please fill in	
Name (Same as card)				
Address				
Phone				
Card type(check one)	VISA		_Mastercard	
Card Number				
Expiration datePlease make all checks payable to Mail to: Camp Bluegrass	(3 digit ID#) to South Plains) College.		
South Plains College A 1401 S. College Ave. Levelland TX 79336	Attn: Kasey Re	yes		

If you have questions $-\frac{info@campbluegrass.com}{}$ or call 806-716-2341