



# Reading Camp

## (entering grades 3-6) cost FREE

A Sunday – Friday week-long residential camp with a focus on improving reading skills. Mornings are set aside for small group learning led by volunteer teachers. The rest of the day is filled with field games, songs, crafts, hiking, swimming, campfires, chapel, and more! This is a great week for your child to unplug from screens, get immersed in nature, and pick up some new reading skills while having fun! Teacher referral and test scores are requested prior to camp.

It is a free camp with limited spaces available. You only need to provide transportation to and from camp. If you are interested in sending your child, please fill out the top portion of the attached form and send it back to school. Your teacher will fill in the bottom portion and send it in for you. Once your child is registered you will receive an email with some additional forms to fill out and a packing list so your child knows what to bring to camp.

**Lutherwald**  
July 16-21, 2023

**Lake Luther**  
June 11-16, 2023

**Lutheran Hills**  
June 25-30, 2023



How to Register: Fill out a paper registration form and return it to your child's teacher or mail it to the office at LOMIK 5215 N 450 W, Angola IN 46703.



# Summer Camp REGISTRATION Form

(DO NOT USE IF REGISTERING ONLINE)

Name: \_\_\_\_\_ Gender: M  F  Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Preferred Name: \_\_\_\_\_ T-shirt size S  M  L  Adult S  M  L  XL

Address: \_\_\_\_\_ Current Grade (as of today): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Email\*: \_\_\_\_\_

\*Please provide a valid email address for the parent or legal guardian of the camper.

Home Congregation: \_\_\_\_\_ City \_\_\_\_\_

Lake Luther <input type="checkbox"/>	Lutherwald <input type="checkbox"/>	Lutheran Hills <input type="checkbox"/>
Camp Program Attending: <u>READING CAMP</u>		
Week Attending: _____		

TEST SCORES AND OTHER INFORMATION:		
ISTEP _____	NWEA _____	OTHER _____
Special interests of the child: _____		
Academic Strengths/Weaknesses: _____		
Parent's comments/concerns: _____		

Parent Signature \_\_\_\_\_

Parent Name (Please print) \_\_\_\_\_

Pastor's Signature\* \_\_\_\_\_

\* Required if congregation makes partial or full payment

**TO REGISTER:** Mail one completed form per camper to Lutheran Outdoor Ministries, 5215 N 450 W, Angola IN 46703. Make sure your teacher has added the test scores to the form.

**BUDDY REQUEST.** Campers of the same age and grade are assigned to cabin groups. Campers may request one friend to be with them in a cabin. If these requests are for the same age/grade and are mutual, we will try to honor them.

**OUR MISSION:** Lutheran Outdoor Ministries Indiana-Kentucky (LOMIK) welcomes all and provides Christ-centered programs for building faith and life-long relationships in a safe, caring, and fun environment.

**OUR VALUES:** Faith – Family & Community – Service – Integrity