

**DINNER THEATER - AUGUST 15, 2019 - 5:30PM**

**PLEASE REGISTER BY AUGUST 7**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Church/Group Name \_\_\_\_\_

\_\_\_\_\_ \$20 per person    Total \$ \_\_\_\_\_    Check # \_\_\_\_\_

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ 3 digit code \_\_\_\_\_

Include payment and send to: **Lake James Christian Camp 1880 W 275 N Angola, Indiana 46703**

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