

2010 MAS Spring Camp Out Registration Form May 14-16 (Friday-Sunday)

Name(s): _____

Address: _____

City and Zip: _____

Email (please, if available): _____

No. of people _____ **@\$135.00 per person**

Total amount enclosed: _____

**Make checks payable to MAS and mail to: Colleen Traylor
3440 Grange Hall Rd.
Holly, MI. 48442-8227**