# 2012 Camporama - District Application

**(Please Complete and Return to the District Office. Send National Application to National Office)**

**Questions?** **District Office 916-379-9600 ext 1138 or email pmcwilliams@agncn.org one application per person.**

Last Name (Please Print) Middle Initial First Name

Church Name OP #

Mailing Address

City

State Zip Code

Date of Birth

_____/_____/_____

Area Code + Phone Number

(_____)_____

Email

_____

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**District Payment Made to: AGNCN**

○ **Check**

○ **Credit Card**

**Nor Cal / Nev District Fees:**

Postmark Date by: Chartered / Non-Chartered

| | | | |
|---|---|---|---|
| **May 15, 2012** | **$95** | **$115** | Per-Person |
| **May 16-June 15** | **$110** | **$130** | |
| **June 16-June 27** | **$125** | **$145** | |

Total District Fee Paid

**$**_____

**Type:** MasterCard or Visa (Circle One)

_____ _____

Card Holder's Name

Card Holder's Address

Credit Card Number

Card Holder's Phone Number (_____)_____

EXP. Date

MO Year Three digit code_____

**X**_____

Card Holder's Signature

**Important!** **Please mail this registration to the: Royal Rangers District Office**

6051 South Watt Avenue
Sacramento, CA 95829-1304