



Prayer & Action
2025 Summer Mission Camp

Registration Form

College Week is June 1-June 6, 2025

Goodland, KS

Name: _____

Address: _____

Phone: _____
Cell _____

Home _____

Email _____

Please fill out the Health Form B and return them with your return them with your registration fee of \$100.00. Form B can be found at <https://salinadiocese.org/diocesan-forms/>

Please enclose your non-refundable per person fee of \$100.00 with this form to : Office of Youth Ministry--PO Box 825--Salina, KS 67401