



Crowsnest Lake Bible Camp's
GROUP INFORMATION FORM

Group Name: _____

Your Name: _____ **Email Address:** _____

Mailing Address: _____

Phone Number: _____

Names of Other Leaders: _____

Dates of rental: _____

Expected time of arrival? _____ **Expected time of departure?** _____

***Approximately how many people are in your group?** _____

About how many males? _____ **Females?** _____

**Final numbers can be provided at a later date.*

Please indicate which meals your group will require:

<u>Day of Arrival</u>	<u>Full Days</u>	<u>Day of Departure</u>
Breakfast	Breakfast	Breakfast
Lunch	Lunch	Lunch
Dinner	Dinner	Dinner

Each night's accommodation includes 3 meals. Any additional meals will be charged as extra meals.

Is your group requesting camp staff to do dishes? (Rate is \$5/person/day extra) _____

Are there any non-food related allergies or other health concerns we should be aware of?

Please indicate any of the following that your group requires or would like to use:

Piano

Sound system

Sauna

Microphones

Projector

Outside Fire Pit

* If you require programming, please contact the rental coordinator, rental@crowcamp.ca, to make arrangements.

Please send this form, COMPLETELY filled out, along with your \$300 deposit and a separate \$300 damage deposit cheque to:

Crowsnest Lake Bible Camp

P.O. Box 250

Coleman, AB

T0K 0M0

OR Fax to: 1-587-838-9724 Email to: rental@crowcamp.ca

This form and your cheques must be returned to us to confirm your booking.