

BOOKING APPLICATION

Name of Group _____

(Church, school, organisation, etc)

Purpose of stay (youth camp, retreat) _____

Contact name _____

Contact number _____

Email _____

Group Leader on camp _____

Address _____

Email _____

Phone (AH) _____ BH/mobile _____

Dates required: Arrive on _____ check in 3:00 pm

Depart on _____ check out 10:00 am weekday

check out 3:00 pm Sunday

No of nights _____

NUMBER BOOKED _____

If known, adults (over 12) male _____ female _____

Child (3-11) male _____ female _____

CATERING required or, SELF CATERED

I have read & agree to abide by the Booking Terms & Conditions as provided to me.

Group Leader's signature _____ date _____

Deposit of \$ _____ A deposit of \$10 per person is payable.

Cheque enclosed.

Direct deposit to BSB 012 628 Account 2345 31111