

FAMILY CAMP 2010

July 10—14

Bethel Park
Bridgman, Michigan

Please keep this page for
your information.

RESERVATION POLICY

- Registration begins: 9:00 A.M. E.S.T. **February 10**,
- Phone/fax/email reservation honored 7 days.
- \$50.00 deposit validates reservation request.
- Deposit payable to: **Bethel Park Retreat Center**
- 10 % discount offered when room reservation is for "5 nights and is Paid in Full" by **April 15, 2010**.
- Deposit refund deadline: **June 15, 2010**.
- Minors attending without parents must submit "Guardian Consent Form". (see backside of this form)

LODGING POLICY

- All campers are required to check-in.
- All campers are required to sign, "Registration Log" before occupying room.
- All campers are required to provide "Emergency Consent Form". (see backside of this Form)

For emergency purposes, Bethel Park Management is required to know who is on camp, in what building, and in which room our guests are staying.

RETURN

Reservation Form & Deposit to:

Bethel Park Retreat Center
P.O. Box 480
Bridgman, MI 49106



FAMILY CAMP 2010
REGISTRATION FORM

ROOM RESERVATION DATA

Name: _____

Address: _____

City: _____ State: _____ Zip _____

Arrival Date: _____ Departure Date: _____

Number of occupants: _____ adults, _____ children

Phone (_____) _____

Email: _____

PAYMENT OPTIONS

- **Credit Card:** Visa or Master Charge (circle one)

Name on Card: _____

Expiration Date: _____ Authorized Amt: \$ _____

CC # _____

- Check #: _____ Payable to: **Bethel Park Retreat Center**

CONTACT INFORMATION

Phone: 269-465-6669, Fax: 888-833-0269

Email: staff@bpcamp.com

Website: www.bpcamp.com

<input checked="" type="checkbox"/> ACCOMODATIONS	Per DAY	Entire Camp	Max Occup.
<input type="checkbox"/> Chalet #1, #4 & #5	15.00	75.00	2
<input type="checkbox"/> Chalet #2	18.00	90.00	4
<input type="checkbox"/> Chalet #3 & #6	16.00	80.00	3
<input type="checkbox"/> Keller Motel #8	14.00	70.00	4
<input type="checkbox"/> Shady Nook #10	35.00	175.00	8
<input type="checkbox"/> Elim Motel #12 - #23	17.00	85.00	4
<input type="checkbox"/> Sp. Dorm #1, 5, 8, & 12	33.00	165.00	5
<input type="checkbox"/> Sp. Dorm # 3, 9, 10, 11 &13	31.00	155.00	4
<input type="checkbox"/> Sp. Dorm #2, #4, #6, & #7	30.00	150.00	2
<input type="checkbox"/> E.T. Motel #28 & #35	38.00	190.00	4—6
<input type="checkbox"/> E.T. Motel #29, 30, 32, & #34	31.00	155.00	3—4
<input type="checkbox"/> E.T. Motel #31 & #33	31.00	155.00	2
<input type="checkbox"/> Condo #36—Handicapped accessible	38.00	190.00	4
<input type="checkbox"/> Condo #43—Handicapped accessible	38.00	190.00	4
<input type="checkbox"/> Condo #37 - #42	38.00	190.00	6
<input type="checkbox"/> RV Hook-up	17.00	85.00	N/A

LINEN POLICY

Linens: blanket-pillow-pillowcase, towel & washcloth
 \$10.00 charge per person per event .
 (Please indicate) _____ Yes, _____ No, thank you.
 Linens are needed for _____ (# of attendees).

Office Use Only: DR _____ / _____ / _____ C#: _____ Room #: _____ #OC: _____ Deposit/Amt Paid: \$ _____

"GUARDIAN AUTHORIZATION CONSENT FORM"

_____ Age: _____ (Male - Female)?

_____ Age: _____ (Male - Female)?

_____ Age: _____ (Male - Female)?

Print Names

We, the parents of the above mentioned minor (s) hereby state that we have given them permission to attend Family Camp 2010 at Bethel Park in Bridgman, Michigan.

_____ have consented to be their guardian (s) during this time. To include: trip to, time at Bethel Park, and the return trip home after camp.

Parent Signature

Guardian Signature

_____, 2010

_____, 2010

COMPLETION of "Emergency Consent Form" MANDATORY!!

Please Print

IN AN EMERGENCY, CONTACT:

1. _____ (_____) _____ - _____

2. _____ (_____) _____ - _____

3. Any medical concerns we should be aware of? (YES) _____ (NO) _____

IF yes, describe: _____

4. In the event contact with the designated person (s) cannot be made the undersigned authorizes Bethel Park Retreat Center Management to act in my behalf.

Signature

Date

_____, 2010