

CONTRACT

FOR THE USE OF CAMP CHI RHO

Organization _____

Group Name and Purpose _____

Group Leader _____

Address _____, _____
(Street) (City/State/Zip)

Phone _____, _____, _____
(home) (business) (fax)

I wish to reserve Chi Rho Center beginning at _____ AM(PM) on _____,
(time) (date)

and would like the following meals:

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Breakfast							
Lunch							
Dinner							

We plan to depart at _____ AM(PM) on _____.
(time) (date)

We expect:

	Number	Charges	Sub-total
Children		\$	\$
Youth		\$	\$
Adults		\$	\$
Totals			\$
25% Deposit Due			\$

Reservations are confirmed only after the deposit and this contract is received. A full refund will be granted if Chi Rho is informed of a cancellation 60 days ahead of the event, a 50% refund if 30 days notice is given.

(Signature)

(For)

(Date)