



**GRAND OAKS BAPTIST ASSEMBLY**

9463 STATE HWY 190 CHILLICOTHE MO 64601 \* 660 646-1906 \* grandoaks@grandoakscamp.org

**GROUP RESERVATION AGREEMENT**

Please read through the policies sheet(s) provided and check over this agreement form. Complete and make changes as needed. Sign and return it in the envelope provided along with a \$\_\_\_\_\_ deposit to hold your reservation. Churches: We also need your insurance carrier to email or snail mail a copy of a "Certificate of Liability" to Grand Oaks. Thank you.

NAME OF GROUP OR SPONSOR \_\_\_\_\_

TYPE OF GROUP/EVENT \_\_\_\_\_

PERSON IN CHARGE \_\_\_\_\_ PHONE Cell \_\_\_\_\_ Alt. \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE OF ARRIVAL \_\_\_\_\_ TIME \_\_\_\_\_ DATE OF DEPARTURE \_\_\_\_\_ TIME \_\_\_\_\_

EXPECTED # IN GROUP ADULTS \_\_\_\_ M \_\_\_\_ F YOUTH \_\_\_\_ M \_\_\_\_ F TOTAL \_\_\_\_\_

**CONFERENCE/MEETING SPACE REQUESTED (# DENOTES CAPACITY)**

- \_\_\_\_ RETREAT CENTER MULTI USE ROOM (50)
- \_\_\_\_ CHAPEL (220)
- \_\_\_\_ DINING HALL (220)
- \_\_\_\_ PARKER HALL
- \_\_\_\_ OLD LODGE

**LODGING SPACE REQUESTED (# DENOTES CAPACITY)**

- \_\_\_\_ RETREAT CENTER (4 Rooms: 12, 12, 14, 14)
- \_\_\_\_ STAFF CABINS 1 thru 4 (4 Rooms: 6, 5, 6, 6)
- \_\_\_\_ STAFF CABINS 5 thru 10 (6 Rooms: 3, 3, 3, 3, 7, 7)
- \_\_\_\_ NURSE CABIN (2 Rooms: 3, 4 with shared bath)
- \_\_\_\_ RIVERVIEW CABINS (3 Cabins: 26 Each)
- \_\_\_\_ PIERCE HALL (2 Rooms: 22 Lower, 24 Upper)
- \_\_\_\_ HILLTOP CABINS (6 Cabins: 14 Each)

**RECREATIONAL VEHICLE SPACES**

- \_\_\_\_ LODGE CIRCLE (2) (water & electric, parking on grass)
- \_\_\_\_ DINING HALL AREA (2) (water & electric)
- \_\_\_\_ POOL AREA (2) (full hookups)
- \_\_\_\_ HILLTOP (2+) (water & electric)

**RECREATION/ACTIVITIES REQUESTED**

- \_\_\_\_ SWIMMING POOL: DATE \_\_\_\_\_ TIME \_\_\_\_\_ (one 2 hour swim with lifeguard(s) provided by camp)
- \_\_\_\_ PADDLEBOATS: DATE \_\_\_\_\_ TIME \_\_\_\_\_ (lifeguard provided by camp)
- \_\_\_\_ MINIATURE GOLF: DATE \_\_\_\_\_ APPROXIMATE TIME \_\_\_\_\_
- \_\_\_\_ BASKETBALL/VOLLEYBALL COURT \_\_\_\_\_
- \_\_\_\_ SAND VOLLEYBALL COURT \_\_\_\_\_
- \_\_\_\_ SOFTBALL \_\_\_\_\_
- \_\_\_\_ FRISBEE GOLF \_\_\_\_\_
- \_\_\_\_ TUG OF WAR \_\_\_\_\_
- \_\_\_\_ CAMPFIRE \_\_\_\_\_
- \_\_\_\_ OTHER \_\_\_\_\_

**FOOD SERVICE REQUESTED**

- \_\_\_\_ WE WILL BE PROVIDING OUR OWN USING THE OLD LODGE KITCHEN
- \_\_\_\_ WE WILL BE PROVIDING OUR OWN USING THE RETREAT CENTER KITCHEN
- \_\_\_\_ WE WILL HAVE CARRY IN OR CATERED SERVICE IN THE DINING HALL
- \_\_\_\_ WE WILL CARRY IN AND PREPARE OUR OWN USING THE DINING HALL KITCHEN
- \_\_\_\_ WE WILL BE USING THE DINING HALL KITCHEN WITH GRAND OAKS MENUS

FIRST MEAL: DATE \_\_\_\_\_ B L S (Circle one) LAST MEAL: DATE \_\_\_\_\_ B L S (Circle one)

OTHER REQUESTS (special diet, snacks, coffee bar, etc. \_\_\_\_\_)

Grand Oaks Baptist Assembly, Inc. holds each guest group leader and organization renting the facilities responsible for the conduct and activities of their group members and expects them to follow the policies outlined in the "General Policies" sheet provided. The Grand Oaks Baptist Assembly's statement of faith adheres to the 2000 Baptist Faith and Message. Organizations and/or individuals wishing to use Grand Oaks facilities must comply with this statement of faith.

"I have read and agree to follow the Fee information and policies outlined in the enclosed papers, including the refund policy."

\_\_\_\_\_  
(signature of person sponsoring the event)

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(signature of camp representative)

\_\_\_\_\_  
(date)