

LANCASTER CAMP GROUND FACILITY RESERVATION FORM

2151 W. Fair Avenue Unit 100 Lancaster, OH 43130 (740) 653-2119

Day(s) & Date(s) Reserved: _____ **Date:** _____

Facility Requested: _____ Taken By: _____

Name of Group/Activity: _____

Contact Person's Name: _____

Address: _____

Assn. Member? Y or N

Non-Profit? Y or N

Contact Phone Number: () _____

Tax I.D. # _____

() _____

Code _____

Deposit Policy:

A \$50.00 security deposit along with this "signed" reservation form is required to hold your reservation.

**** NO SMOKING OR ALCOHOLIC BEVERAGES PERMITTED ON THE GROUNDS ****

- Check-in time for overnight stay is no earlier than 4:00 p.m. and check-out time is no later than 12:00 p.m. unless other arrangements are made with office.
- Children are welcome. **No pets** please.
- Rates are subject to change without notice.
- Please **close doors** and **turn off lights** when you leave.
- No bike, roller blades, skates, etc. in or around buildings.
- Signs displayed on Camp Ground need to be approved by General Manager before displaying them.

NOTE: Set Up / Tear Down

By Us: \$50.00

By You: 0.00

Cancellation Policy:

We must receive notice of any cancellation at least 30 days prior to the reservation for a refund. Please note there is a \$10 cancellation fee.

Purpose for Renting Facility: _____

How Did You Hear About Us: _____

If Facility Requested is for overnight,

How Many Nights Are You Planning To Stay? _____ How Many People Are We Accommodating? _____

Final payments is due before date of your rental (except for overnight in the Units)

Credit Card, Check or Money Order payable to: Lancaster Camp Ground

MEALS: Are we providing meals? Y or N If So, For How Many? _____

(Note: Final meal reservations required seven (7) days in advance. Billing is based on your reservations.)

What Other Equipment of Ours Will You Need? _____

Other Instructions: _____

I have read and understand the policies as listed above. Signature: _____

2020 LANCASTER CAMP GROUND FACILITY PRICE LIST

A **\$50.00 security deposit** is required to hold/confirm your reservation in addition to the price list below. **Balance is due before date of Rental** (except for Overnights in Units). Security deposit will be returned after rental inspection.

Cancellation of reservation less than 30 days of reserved date, NO refund will be given.
Please note there is a \$10 cancellation fee.

<u>FACILITY:</u>	<u>ASSN. MEMBER Rate:</u>	<u>NON PROFIT Rate:</u>	<u>COMMERCIAL Rate:</u>
<u>Activity Building:</u>			
Day Only: 7am-11pm	\$ 180/Day	\$ 300/Day	\$ 350/Day
Hourly: 4 hours*	\$ 60 - 4 hours Addl. hour \$10 each	\$ 125 - 4 hours Addl. hour \$20 each	\$ 200 - 4 hours Addl. hour \$25 each
<u>Units 1 & 2:</u>			
	Sleeps 32 in each building, air conditioning, full kitchen		
Day Only: 7am-3pm	\$ 100/Day	\$ 150/Day	\$200/day
Hourly: 4 hours*	\$ 50 - 4 hours Addl. hour \$10 each	\$ 75 - 4 hours Addl. hour \$15 each	\$100 – 4 hours Addl. hour \$20 each
Overnight: 4pm-Noon	\$ 15/Person /per Night with 10 person Minimum	\$ 20/Person/per Night with 10 person Minimum	\$ 35/Person/per Night with 10 person Minimum
Shelter: Day 7am-9pm #1 #2 #3 #4 #5	\$ 15 /Day	\$ 25 /Day	\$ 30 /Day

Band Camps and Large Groups using grounds: See Manager

Cafeteria: Call for pricing.

FOR OFFICE USE ONLY

Set Up Fee: \$ 50.00 (If Applicable)	\$ _____
Activity Building: Day or 4 Hours + _____ addl.	\$ _____
Unit # : Date _____ #People _____ x \$ _____ ea. =	\$ _____ (10 person Minimum Overnight)
Unit # : Date _____ #People _____ x \$ _____ ea. =	\$ _____ (10 person Minimum Overnight)
Cafeteria: Date _____	\$ _____
Shelter: # _____	\$ _____
Other: _____	\$ _____
SUB-TOTAL ...	\$ _____
Less Deposit Paid ... -	\$ - Date Pd & Rec. # _____
BALANCE DUE - before date of use ...	\$ _____ Date Pd & Rec. # _____