



CAMP HELEN BRACHMAN



Dep:		
Menu:		
Paid:		

OVERNIGHT RESERVATION CONTRACT

Please send the completed reservation and a **\$200.00** non-refundable deposit to:
Camp Helen Brachman, 9341 Asbury Drive, Almond, WI 54909

Name of Group _____ Contact Person _____ Projected Attendance _____

Address _____ City _____ State _____ Zip _____

Main Phone _____ Alternate Number _____ FAX _____ Email _____

Date of Arrival _____

Time of Arrival _____

Date of Departure _____

Time of Departure _____

Lodging

Winterized Buildings	Per Day	Capacity
Retreat Center	\$385	32
Lakeside Cabin	\$275	20
Bunkhouse	\$150	14
Health Center	\$150	14
Dining Hall*	\$150	135
Rogers Hall	\$150	150
Arts and Crafts	\$60	NA
Staff Lounge	\$50	NA

Winter buildings are available August - May

Summer Cabins	Per Day	Capacity
Hawk	\$115	10
Falcon	\$115	10
Eagle	\$115	10
Fox	\$115	10
Bobcat	\$115	10
Coyote	\$115	10
Wolf	\$115	10
Bear	\$115	10

Summer cabins are available August & September

Other Summer Buildings - available August & September

North Camp 1	\$150	16
North Camp 2	\$150	16
Zucker 1	\$150	16
Zucker 2	\$150	16

North Camp Lodge	\$125	75
Tent sites	\$6	NA
Shower House	\$30	NA
The Studio	\$50	NA

*There is no charge for the kitchen, dining hall or dishwashing if we provide food service.

The Dining Hall is only available for food service. Special arrangements may be made to accommodate smaller groups if necessary.

Program Services

Lifeguards	\$20	per hr
minimum -2 guards, 2 hours		
Boats	\$10	20
Bicycles	\$15	10

Challenge Course	\$30	per hr
less than 14 people in each group		
TV/VCR/DVD	\$25	NA
Video Projector	\$50	1

Food Service

provided by Camp Staff

provided by group

Please provide menu choices at least **two weeks** prior to arrival. Breakfast is available anytime after 8 am and dinner no later than 6:30 pm. Lunch can be scheduled at any time. We can accommodate a few vegetarians with your regular menu choice. The menu choice form is available at www.campbrachman.org.

Please complete the back side of this form.

Rental Contract Agreement

USER GROUP

AUTHORIZED REPRESENTATIVE (please print)

COA agrees to lease to the above named **USER** the facilities at the location, for the time, or times for the purpose, at the cost, and in accordance with the agreements and provisions as set forth herein.

USER agrees to provide a copy of the groups certificate of insurance prior to arrival. They are available free from your insurance agent.

USER agrees to have on hand parent permission slips for every minor in attendance as well as parental authorization to receive emergency medical treatment for said minor.

USER agrees not to permit any activities on **COA** property which are illegal, immoral, or inconsistent with **COA** principles or policies.

USER agrees to protect **COA** property and to reimburse **COA** the reasonable cost of repair or replacement of any property damaged in connection with the **USER**'s use there of, normal wear and tear excepted. All such damages to be reported to **COA** immediately.

USER agrees to leave the facility in a clean and tidy condition, and to reimburse **COA** for the cost of any clean-up beyond normal janitorial maintenance.

USER promises to indemnify, hold harmless, and defend **COA** in any action at law or in equity and any claim made against **COA** arising in connection with **USER**'s use of the facilities, except for any liability finally determined to be caused by **COA**'s own negligence or intentional act.

USER agrees to pay **75%** of estimated rental cost (based upon projected attendance) if cancellation occurs within 30 days of arrival date.

USER agrees to pay **50%** of meal cost for no-shows as well as for any reserved but unused buildings.

USER agrees to give **COA** permission for the use of **USER**'s name, pictures, and comments in publicity materials including the website as deemed proper by the Camp Helen Brachman Administration

Groups with children under the age of 18 - Please Note:

As the authorized representative of the above named organization, I hereby certify that I and/or the organization have permission from the parents/guardians of the minor child(ren) to be with me and/or the organization and to participate in all activities and that I and/or the organization will be responsible for the child(ren) while they are at Camp Helen Brachman.

Signature of Authorized Representative

Date