

Rock Creek Ranch Retreat

A Ministry of Blessed Hope Ministries Inc. 2265 W. Ironwood Hill Dr. Tucson, AZ 85745, Phone: 520 9074769

Registration Form

_____ Deposit Required

Name of User/Organization _____ Phone: _____

Address: _____ City: _____ State: _____ Zip _____ .

Date of requested use _____:

Type of Retreat _____; Type of Group _____; Approximate No. _____

Camp Director's Name _____; Phone: _____

Camp Director's email: _____

Medical Attendant's Name: _____; Phone: _____

Head cook's Name: _____; Phone: _____

Please read this carefully!

Retreat Payment:

- Single day events will be charged the day rate ----- \$10 per person.
- Weekend camps with a 1-night minimum will be charged \$33 per person **per DAY**.
- Check-in time will be 2:30 pm or later. Overnight retreats should plan to leave by 1:00 pm unless other arrangements been made prior to your arrival.
- A camp deposit is required for each reservation made to guarantee your dates on the camp calendar.
- Meals at an additional \$30 per person per day can be provided.
- Cancellation policy: camp cancellations made 45 days prior to camp arrival are fully refundable. Camp cancellations made inside of 45 days inside of your camp arrival will forfeit the deposit.

Camp agreement: I have read the enclosed correspondence ranch rules, and will be responsible for my group adhering to these rules and policies.

Camp director's signature: _____ **Date:** _____

	Rate (per person per day)	# of person	# of days	Total amount
Overnight	33			
Day use	10			

Damage/repair/other miscellaneous charges \$ _____

Cleaning fee (if camp and cabins are not left clean) \$ _____

Subtotal \$ _____

less deposit \$ _____

Total due _____

For office use only:

Registration form sent on _____ Registration deposit _____