

197 Camp Winchell Coulee

RENTAL AGREEMENT

Name of Organization or Group: _____

Contact Person: _____

Address of Contact Person: _____

City: _____ Prov: _____ Postal Code: _____

Phone: (Day) () _____ (Evening) () _____

Email Address: _____

Length of Stay: Overnight Weekend Week

Date(s) of Camp: _____

Facilities Desired: (please choose all that apply)

- Winchell Lodge Washrooms/Showers Fire Permit / Wood
 Cook Shelter Tenting Sites

I, _____ on behalf of _____, am hereby aware of the pricing for camp Winchell Coulee, and have downloaded and read and agree to adhere to the rules and regulations pertaining to the camp facilities. I agree that if any damage to the property or buildings occurs during our group or organizations booking, that our group will forfeit our damage deposit, and that we will repair the damage caused, or reimburse the Camp 197 Winchell Coulee Association for the cost of replacement or repairs.

Signed: _____

Dated: _____

Only when your deposit cheque is received will your Camp Date be confirmed. Mail Or Drop Off Rental Agreement Form & Deposit of \$100.00

Make All Cheques Payable to **197 Camp Association**

**197 CAMP WINCHELL COULEE
C/O JACK PULLAN
31 FALSHIRE PLACE NE
CALGARY ALBERTA
T3J 2C6**

*Camp check in time - Friday after 4:00 pm - self check in - use check in sheet in lodge or cook shelter
Camp check out time - Sunday 1:00 pm - camp person will be on site to check you out and collect the rental cheque
Check out time on Sunday, can be pre negotiated to another time, if required. Must be done prior to actual camp dates.*

**** PLEASE REMEMBER THAT THIS FORM AND DEPOSIT CHEQUE MUST BE RECEIVED WITHIN 14 DAYS TO HOLD YOUR DATES****

OFFICE USE ONLY

Cheque Number: _____

Date Cheque Received: ____/____/____