197 Camp Winchell Coulee RENTAL AGREEMENT

Name of Organization or Group:						
Contact Person:						
Address of Contact Person:						
				_ ,		,
Phone:	Day:				Eve:	
Email Address:						
Length of Stay		Overnig	jht		Weekend	■ Week
Date(s) of Camp:		/	/	to	/_	/
Facilities Desired: (please choose	all that	apply)				
□ Winchell Lo	dge	□ Wa	ashrooi	ms/Sho	wers	$\hfill \square$ Fire Permit / Wood
☐ Cook Shelte	er	□ Te	nting S	Sites		
I,						
Make All Cheques Payable to 197 Camp Winchell Coulee CALGARY AB T3J 1X6						
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 U	SE ONL	LY		
Cheque Number:		Date C	heque	Received	d:	_//