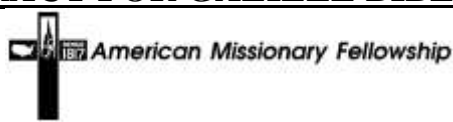


CONTRACT FOR GALILEE BIBLE CAMP

Bill Bennett/ Camp Manager
 586 Camp Galilee Road
 LaFollette, TN 37766
 423-562-4910
 bteamcamp@bellsouth.net



Regional Director
 Mike Pinkerton
 250 Blackberry Lane
 Douglasville Ga 30134

PLEASE COMPLETE ALL BLANKS

CHURCH/GROUP NAME _____

CONTACT PERSON _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONFERENCE DATES:

BEGIN _____ Time _____ A.M. P.M. END _____ Time _____ A.M. P.M. _____

TYPE OF CAMP _____ **NUMBER OF CAMPERS** _____

COST:

- ◆ Send a **\$100** non-refundable deposit with this application.
- ◆ Group agrees to pay **\$8.50** per person per night including workers. Campers in for the day will pay **\$2.00** per day **\$8.00** per family.
- ◆ A minimum charge of **\$200** is required for each night of use.
- ◆ Final payment must be made on last day of your stay.

AGREEMENT:

- ◆ I have read and our group agrees to abide by Galilee Bible Camp's policies and procedures (see enclosed). The **contact person** will be responsible to communicate these guidelines to the group.
- ◆ Please provide upon your arrival a schedule of your activities. Also please allow a time in your scheduled stay for a short presentation of the ministries of Galilee Bible Camp.

Important! - Please remember that our camp's purpose is to evangelize and disciple people for Jesus Christ! We are responsible to insure that these grounds and facilities are used primarily for ministry to spiritually needy people, particularly children and youth. The Camp Manager has final authority on all matters concerning the camp and grounds.

Please send application to: Bill Bennett/ Camp Manager 586 Camp Galilee Rd. LaFollette, TN 37766

I have read and agree with terms put forth:

(signature of contact person) _____ Date _____

Contract accepted by Camp Manager (Signature) _____ Date _____

Office use only: Date received _____ Deposit Received _____ Update _____