

USER GROUP AGREEMENT

Fortune Lake Lutheran Camp

138 Fortune Lake Camp Rd, Crystal Falls, MI 49920

(906)214-2267**www.fortunelake.org **hospitality@fortunelake.org

Dates requested:

Facilities Requested:

Organization: _____	Group Leader: _____
Address: _____	Address (if different): _____
City/St/Zip _____	_____
Phone: _____ Email: _____	Phone: _____
Group Purpose: _____ ESTIMATED # : _____	Email: _____

GUARANTEED* Count (due 1 week prior to stay): _____	Arrival Date/Time: _____
Meals? No / Yes First: _____ Last : _____	Departure Date/Time: _____

Check in is at 3 pm CST and check out is at 11am CST. Exceptions must be approved at least a week in advance.

A nonrefundable deposit of 10% of quoted price, but not less than \$100, is due to reserve your registration.

LODGING, MEALS AND AMENITIES

Guaranteed number of participants is needed one week prior to Group's first day at Camp. Meal service requires a minimum of 15 people. Meal costs are per person. Since meals and any special dietary needs are purchased and staff are secured for each group based on your guaranteed number, there is no discount for those in your group who do not attend meals. **Groups are held accountable for 100% of the guaranteed number of attendees for meal and lodging costs.** Non-refundable deposit fee is 10% of your total quoted fee amount but not less than \$100.

Total Fee based on <i>ESTIMATED QUOTE</i> (see back side for detail):	\$
<u>Non-Refundable/Non-Transferable DEPOSIT</u> with reservation (10%, not less than \$100):	\$
Remaining 50% of Estimated Quote (due 30 days prior to event):	\$
REFUNDABLE Damage Deposit check (due 30 days prior to event):	\$ 300.00 separate ck
ADJUSTMENT to Estimated Quote, based on final arrangements:	\$
BALANCE DUE AT CHECK-IN:	\$
CANCELLATIONS RECEIVED LESS THAN 14 DAYS PRIOR TO 1ST DAY OF EVENT = NO REFUND	

Your reservation is only confirmed upon receipt of the deposit (10% of quoted price but not less than \$100).
Additional 50% of total quoted fee is due 30 days in advance. Balance due no later than arrival at Camp.

☐ I acknowledge that I have read and agree to the Terms and Conditions contained in this agreement and in the current Fortune Lake Lutheran Camp User-Groups Policies and Procedures as well as supplemental documents which were provided to me, and on behalf of the Group named above am indicating our agreement to payments and policies as outlined.

Insurance: select one of the following:

☐ I have attached our Group's Insurance Certificate covering our time at Fortune Lake.

Group Leader's Name (please **print**) Group Leader's **Signature** DATE _____

RCVD FLLC by _____ DATE _____