



**CrossView Christian
Camp P.O. Box 288
Dickens, TX 79229
Crossviewcamp.org**



EVENT CONTRACT

This is a legal and binding contract between the Organization and CrossView Christian Camp & Retreat Center. Please answer every question, obtain both required signatures, make and keep a copy for your records, and return the original to CrossView Camp along with your \$300 deposit.

CONTACT INFORMATION

Name of Organization:

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

Name of Event Coordinator: _____ Title: _____

Business Phone: _____ Cell Phone: _____ E-mail Address: _____

EVENT INFORMATION

Arrival Date: _____ Arrival Time: _____

Departure Date: _____ Departure Time: _____

of Guests 18 & Older: _____ # of Males: _____ # of Females: _____ Group Description: _____

of Guests under 18: _____ # of Males: _____ # of Females: _____ Group Description: _____

PAYMENT COMMITMENT

The Organization will pay CrossView Camp a deposit of \$300 to reserve the dates of their event. The Organization will pay their bill in its entirety (the deposit will NOT be applied) upon arrival at CrossView Camp. The \$300 deposit will be refunded after the Organization's departure from CrossView and the facilities have been inspected, if no property/facilities are damaged, extra cleaning is required, or other charges are incurred.

If the Organization must cancel their event for any reason, their \$300 deposit is not refundable.

Fourteen days prior to the first day of the Organization's event will be the cut-off for removing participants, activities, and/or facilities from the bill. The Organization may add participants, activities, and/or facilities after the cut-off date only by calling CrossView to see if these increases can be accommodated.

The Organization agrees to use all Camp facilities and equipment with care and agrees to cover the cost of any damage caused by careless, reckless, or negligent behavior on behalf of Guests. All facilities should be left reasonably clean and in order, or extra cleaning fees will be applied.

OTHER RESPONSIBILITIES OF ORGANIZATION

The Organization agrees to respect the beliefs of CrossView Camp as set forth in the Statement of Faith and to do nothing by word or deed that will in any way detract from the purpose or testimony of CrossView Camp. The Organization agrees to collect from Guests and submit completed CrossView Release Forms upon arrival. The Organization agrees to go over CrossView's Rules for Events with all their Guests and to enforce these rules. The minimum adult to child ratio is one adult per 10 children (under 18 years old). Adult leaders must be at least 18 years old, properly screened and trained, and able to be responsible for the safety of all children. The Organization understands that alcohol and tobacco in any form are prohibited on Camp property.

Firearms, fireworks, airsoft guns, pets, and other destructive or damaging items are also prohibited.

OTHER RESPONSIBILITIES OF ORGANIZATION (CONT'D)

The Organization understands that use of the high ropes course, climbing wall, low ropes courses, paintball field, pond, and range requires prior notice, and these activities MUST be administered by certified CrossView Staff. A list of all event activities must be submitted and approved by the Camp Director before the event to ensure that none of the activities require the presence of Camp Staff and that none are prohibited by law, Camp policy, or the Camp's insurance coverage.

The Organization is responsible for transportation of all Guests to and from CrossView Camp.

EVENT FEES

The Organization agrees to the following fees (check all that apply & fill in appropriate numbers):

Use Fee	# of Guests _____	x \$12 x # of nights/days _____	\$ _____
Meals (20 person min)	# of Guests _____	x \$8.00 x # of meals _____	\$ _____
Cabin #2 (12 person min)	# of Nights _____	x \$150 + # of guest (after 12) _____ x \$10	\$ _____
Cabin #3 (12 person min)	# of Nights _____	x \$200 + # of guest (after 12) _____ x \$12	\$ _____
Cabin #7	# of Nights _____	x \$75	\$ _____
Kitchen Fee	# of Days _____	x \$100	\$ _____
Lions Den Fee	# of Days _____	x \$50	\$ _____
Low Ropes Course (Up to 2 hours)	# of Guest _____	x \$10 (20 person minimum)	\$ _____
High Ropes Course (Up to 2 hours)	# of Guest _____	x \$12 (20 person minimum)	\$ _____
Climbing Wall	# of Guest _____	x \$12 (20 person minimum)	\$ _____
Paintball Course Fee (20 participants, masks, markers, and CO2 tanks; 2 hours; 4,000 paintballs)		\$450	\$ _____
Additional 2 hours of Paintball		\$400	\$ _____
Pool (up to 2 hours, up to 35 people)		\$175	\$ _____
Pool (per hour beyond 2 hours)		\$50	\$ _____
Pool (for attendees 36-70)		\$50	\$ _____
CrossView Staff	# of Hours _____	x \$15	\$ _____
(If you need a CrossView Staff to help with YOUR activities)			
TOTAL ESTIMATE final amount will vary depending on # of Guests)			\$ _____

REQUIRED SIGNATURES

Event Coordinator:

Printed Name _____ Signature _____ Title _____ Date _____

Board Member from Your Organization:

Printed Name _____ Signature _____ Title _____ Date _____