

User Group Application



Sponsoring Organization		
Address		
Phone	Fax	
Contact Person	Email	
Address		
Day Phone	Evening Phone	Alt Phone
Arrival Time	Departure Time	Estimated Group Size
Choice of Dates	1st	2nd
		3rd

Meal Times

Please note **times** which you would like meals served.
 Minimum of 30 people per meal - if less than minimum, check availability.
Guaranteed meal counts are required 5 days prior to event.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast							
Lunch							
Supper							

Vegan Yes No How many? _____

Seminar Rooms

	<input type="checkbox"/> Yes <input type="checkbox"/> No	# of seats _____	Extra needs per room
Gymnasium - seats 600		_____	
Cafeteria - seats 150		_____	
Aquatic Room 1 - seats 20		_____	
Aquatic Room 2 - seats 20		_____	
Aquatic Room - seats 100		_____	
Gym Room - seats 40		_____	
Craft Room - seats 30		_____	

Lodging Needs

<p>17 Cabins sleeps 20 each # cabins _____</p> <p>Guest Lodges 16 rooms sleeps 2 each # rooms _____</p> <p>RV Sites 40 sites - full hook up # sites _____</p>	<p>Guest Cottage 2 rooms sleeps 2 each # rooms _____</p> <p>3 rooms sleeps 4 each # rooms _____</p> <p>Tent Sites max 4 people per site # sites _____</p>	<p>Directors Lodge 3 rooms sleeps 2 each # rooms _____</p> <p>Please Note All lodging has A/C and heat. Cabins do not have linens.</p>
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Equipment Needed

PA System	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Cordless Mic	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Computer Projector	<input type="checkbox"/> Yes	<input type="checkbox"/> No	TV	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Screen	<input type="checkbox"/> Yes	<input type="checkbox"/> No	VCR	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Keyboard	<input type="checkbox"/> Yes	<input type="checkbox"/> No	DVD	<input type="checkbox"/> Yes	<input type="checkbox"/> No
AV Person	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Golf Cart	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Floor Mic	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Record Meeting	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Special Needs	_____				

Activities

Please note **times** for activities to take place.

	Friday	Sabbath	Sunday
Gymnasium Recreation		N/A	
Racquet Ball		N/A	
Tennis		N/A	
Basketball		N/A	
Volley Ball		N/A	
Beach Volley Ball		N/A	
Swimming Pool		N/A	
Hot Tub		N/A	
Canoes			
Ball Field			
Pontoon Boat Ride			
Ski Boats		N/A	
Rodeo		N/A	
Horseback Trail Rides		N/A	
Horse Arena Rides		N/A	
Horse Carriage Ride			
Horse Wagon Ride			
Tractor Hay Ride			
Camp Fire			

Note: This application supersedes any previous verbal or written communication.

Accident Insurance: Yes No

Your **MUST** have Group Accident Insurance coverage with the exception of Carolina Conference of SDA organizations.

Transportation: You are responsible for all transportation to and from camp and/or any activities that are planned for off-camp premises during you stay.

Guarantee and Finances: Groups desiring the use of the facilities at Nosoca Pines Ranch must arrange ahead by filling out this application. Upon receipt of the application, the date will be checked for availability and you will be notified. The non-refundable deposit is required to complete the reservation process which is \$500.00. Please have the required deposit in the Nosoca Office within two weeks from confirmation from us. If this deposit is not received within the stated deadline, Nosoca reserves the right to cancel the confirmed dates.

Cancellation Policy: This rental agreement may be cancelled at any time until 90 days prior to rental date. However, in so doing, you agree to forfeit your deposit. If cancellation occurs 60 to 90 days prior to rental date, your group agrees to be responsible for 50% of the estimated cost of the retreat based on guaranteed minimum. Cancellation occurring less than 60 days before the rental date will result in your group paying 90% of the estimated cost of the retreat based on the guaranteed minimum. Charges for retreat are made on the basis of facilities used, activities, and the number of people in your group for meals. Your deposit will be used toward your current charges and the balance is due upon receipt of the invoice.

We, the undersigned, have filled out the application to the best of our knowledge. We have read the *ACA User Group Guidelines* and the regulations concerning finances. We agree to these conditions and request use of Nosoca Pines Ranch for our retreat.

Group Leader

Date