



Indian Lake

CHRISTIAN SERVICE CAMP

3915 River Road, P.O. Box 457, Darlington, MD 21034

Camp Use _____
Approved By: _____

Date: _____

Campground Rental Agreement

On behalf of _____, I would like to reserve Indian Lake Camp for the following dates: _____

We will pay \$_____ for use of _____ cabins, dining hall, outdoor chapel, fire pit, bathhouse and campsites.

We will provide a copy of our insurance prior to our arrival.

Campers are expected to provide their own bedding (for single bunks). There is NO smoking, alcohol, or fireworks/arms on the campgrounds.

Enclosed is our deposit of \$500, to confirm this reservation. We understand this deposit will be cashed, but will be returned to us BY MAIL AFTER RENTAL INSPECTION HAS BEEN COMPLETED, provided there has been no damage done by our group. This DEPOSIT IS NOT TO BE SUBTRACTED FROM THE AMOUNT DUE. If we cancel within 30 days of our rental date, we forfeit our deposit.

I also understand that full payment is expected UPON OUR ARRIVAL.

Person in Charge _____

Address* _____

City _____, State _____ Zip _____

Phone: _____

Email: _____

Additional contact's Name _____,

Phone number _____

Email: _____

Signature _____

*This is the address the deposit will be mailed to after rental inspection has been completed



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Rental Worksheet

Name of Group: _____

Date & Time of Arrival: ____/____/____ ____:____ am/pm

Date & Time of Departure: ____/____/____ ____:____ am/pm

Please check group type Men Women Teens
 Children Couples Young Adults

Estimated number of people: _____

A more precise number is requested at least 5 days prior to arrival.

Any activities checked below must be confirmed no later than 30 days prior to your arrival.

Activities Requested	Day/Time
Campfire	_____
Zip Line**	_____
Swing**	_____

Additional Set-up Requests

Return this worksheet with your completed agreement form to the Camp Manager with your deposit to confirm your reservation.

**These activities require additional fees.