

APPLICATION FOR USE OF TAYLOR CHRISTIAN CAMP AT HOLLAND, KY.

Date _____

This application may be submitted no more than 1 year prior to the date of camp use.

Name of Organization: _____

Address: _____

Responsible Officer: _____ Telephone: _____

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Period of Camp Use Desired

From: _____ To: _____
DATE TIME AM or PM DATE TIME AM or PM

On-site Camp Director: _____
NAME ADDRESS

No. of Campers: _____ No. of Staff: _____

LIST SECOND CHOICE OF DATE FOR CAMP USE IF ABOVE DATE IS UNAVAILABLE:

From: _____ To: _____
DATE TIME AM or PM DATE TIME AM or PM

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The above applicant agrees to use the facilities provided in this contract for not more than ____ persons for any one day. Any special sleeping facilities desired beyond the standard capacity of the camp must be specially arranged for with the Board of Directors. The applicant, through its responsible officer in charge, will require campers to conform to all camping standards for organized camping, to conduct their camp in accordance with Article 2 of the by-laws of C. R. E. W. Inc. which reads, "A specific purpose of C. R. E. W. Inc. shall be to operate and maintain a camping facility which shall be used for Christian fellowship and to teach the Bible, all for the purposes of promoting religious and recreational activities."

This contract has no provisions for sub-leasing of the campsite. Upon termination of the period of camp use, the premises are to be left in a clean and sanitary condition. **Open fires by permit only October through May. Permit may be purchased from caretaker.** The only exceptions are the fireplace in the lodge.

Services provided by C. R. E. W. Inc.: Garbage dumpster service, mowing grass and ground care, building and ground maintenance, water and electricity, & checking in and out. Supplies provided by C. R. E. W. Inc.: Brooms, mops, propane, dining room and kitchen equipment, beds and mattresses. LINNENS MUST BE SUPPLIED BY THE APPLICANT.

A deposit must accompany this application (for overnight stay only), to be used as cleanup, damage, & long distance phone usage deposit. All applicants will be responsible for their own liability & medical insurance during any use of the camp facility.

FEE SCHEDULE AVAILABLE UPON REQUEST. FEE / DEPOSIT ACCOMPANYING APPLICATION \$ _____

Mail Application and Deposit to:
Taylor Christian Camp
P.O. Box 511
Franklin, KY 42135

By: _____
Signature (Applicant)

Approved by: _____
C. R. E. W. Inc.

270-586-4315 (office at Franklin, KY)
270-622-9032 (campsite at Holland, KY)

(Revised May, 2006)

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