



CAMP SANKANAC

Home of excellence in Christian Camping since 1941

CAMP SANKANAC RETREAT APPLICATION FORM

GROUP/ORGANIZATION INFORMATION

Group Name: _____

Group or Organization Address/City/State/ZIP: _____

Group Phone: _____ Group Website: _____

Group/Organization e-mail: _____

Do we have a copy of proof of liability insurance for the calendar year of rental?

(Please check) YES NO, a copy is enclosed. NO, a copy is being mailed.

CONTACT PERSON/GROUP LEADER INFORMATION

Contact Name: _____ Home Phone: _____

Cell Phone: _____ Contact e-mail: _____

Home Address: _____

RETREAT INFORMATION

Arrival Date: ____/____/____

Departure Date: ____/____/____

Facility Reserving (Please check all that apply)

Parker House Main Camp (Cliffside, Mill, Scott House) All Camp Other (Please specify: _____)

Time of Arrival: _____ Time of Departure: _____

Type of Group/Purpose of Retreat: _____

Total Number Expected: _____ Do you need Sankanac to provide meal service? Circle: YES NO

Starting Meal: _____ Ending Meal: _____

Please list desired meal times: _____

If using Parker House, will you need access to a kitchen? Circle: YES NO

***PLEASE NOTE: If using Parker House or Banks Cabin on a Friday, your arrival must be AFTER 6:00 pm.**

As authorized signer, I agree that Camp Sankanac and BCM International and any personnel thereof are hereby released from any and all liability for or by reason of any injury or damage of any nature whatsoever which may be sustained by any member of the group using Camp Sankanac property and facilities. I have also read and will comply with Camp Sankanac's policies on rules, registration, pricing, cancellations, and retreats as listed on the website. I understand that smoking, alcohol, and drug use are prohibited. I agree to respect and adhere to BCM International's statement of faith found at www.bcmintl.org/who-we-are/what-we-believe.

Authorized Signature: _____ Date: _____



Please submit this completed form along with the non-refundable reservation fee in the form of a check made payable to Camp Sankanac: \$100 for Parker House, \$200 for Main Camp, \$300 for All Camp. The reservation fee is non-refundable should you choose to cancel, and is in addition to any per person costs of your event. Please do not submit this application unless you have read our policies in full.

Camp Sankanac, 68 Bertolet School Road, Spring City, PA 19475
Phone: 610-469-6320 E-mail: guestservices@campscanac.org

OFFICE USE ONLY

\$ _____ CK# _____ Name: _____

Date Received: _____ Staff Signature: _____