



Camp Lemieux

Facility Rental Agreement Contract

Name of Organization or Group _____

Rental Date (m/d/y): From _____ To _____

Arrival Time: _____ am/pm Departure Time: _____ am/pm

Group Type: Youth/Young Adults Ministry School Age Non-Profit Other

Reason for Rental & Group Size: _____ # of participants

- Wedding Youth Ministry Event School-Age Group
 Family Reunion/Celebration Young Adults Ministry Event Outdoor/Environmental Ed
 Retreat/Conference/Meeting Camp Lemieux Alumni Event Other _____

Primary Contact is the same as on Rental Application OR New Primary Contact Info IS:

Name: _____

Home Phone: () -

P.O. Box / Street: _____

Cell Phone: () -

Town/ City: _____

E-Mail: _____

Province: _____ Postal Code: _____

Preferred Method(s) of Communication:

- Home Phone Cell Phone Email

Fees	Rental Type	# of Days Requested	School, YM Non-Profit	Other	Total
Required	Full Camp - Overnight	<input type="checkbox"/> x _____	\$350	\$1250	
	Full Camp – Full Day	<input type="checkbox"/> x _____	\$350	\$1250	
	Full Camp – Half Day	<input type="checkbox"/> x _____	\$300	\$600	
	Single Cabin - "Poustinia Style" Retreat Getaway	<input type="checkbox"/> x _____	Cost Being Reviewed		
Additional (Choose all that apply)	Time Extension – per additional hour	<input type="checkbox"/> x _____	\$50	\$100	
	Firewood for Camp Fire Pit	<input type="checkbox"/> x _____	Cost Recovery		
	Waterfront Boating Equipment – per boat/day	<input type="checkbox"/> x _____	\$10	\$25	
	RV Electricity – per plug # of RV's = _____	<input type="checkbox"/> x _____	\$30		
	Unfinished Clean Up Fee – per cleaning hr required	<input type="checkbox"/> x _____	\$200	\$200	
Total Rental Cost:					

Booking Confirmation:

Upon receipt of this application, the availability of dates requested will be confirmed when the Camp Rental Agreement Contract has been signed, the Damage/Cancellation Deposit has been received, proof of sufficient Liability Insurance has been received, payment in full has been received, and a copy of a valid Saskatchewan Liquor & Gaming Permit (if required during rental) has been received one (1) week prior to rental date. A copy of the signed Camp Rental Agreement Contract will be sent to the Primary Contact person. The Camp Lemieux Board retains the original.

Cancellation Policy:

Cancellation notice must be received 4 months prior to the rental date or the cancellation deposit will be lost. Any damages will be applied to the deposit; and damage charges above this amount will be invoiced. The additional cost for labour to complete clean up or repairs as a result of any damage to Camp property will be charged to the damage deposit or by invoice should the costs be more than the damage deposit.

Rental Clean Up:

At the end of the rental period, see that all buildings are cleaned, tidy, and all garbage is picked up and placed where previously requested. Cleanup checklists will be provided. Reminder that there is zero tolerance for ANY glass. Any glass found will result in the loss of the damage deposit.

I have included full payment for the Rental above. **Cheque Payable To: Camp Lemieux**

(Please Print Names) I, _____ as the Primary Contact of

_____ (Rental Group Name) have read, signed and made our group aware of the policies, expectations and fees as outlined in the Camp Lemieux Rental Policies with regard to the rental of the Camp Lemieux facilities. I affirm that all of the information given is correct and accurate. We agree to use the camp facilities within the parameters of the expectations, policies and fees as outlined in the attached document and agree to all terms as detailed.

Signature of Rental Group Representative

Dated

Mail Rental Agreement Contract To:

Camp Lemieux Rental

Attn: Camp Board Chairperson – Jennifer Foley

Box 836 Shaunavon, SK S0N 2M0

For Office Use Only: (m/d/y)

Camp Rental Application Date Received _____ Online Email Mail

Camp Policies Signed Date Received _____ Email Mail

Damage/Cancellation Deposit Date Received _____ Mail In-Person

Cash Received: _____ OR Cheque #: _____

SK Liquor Permit Copy Date Copy Received _____ Email Mail In-Person

Official Copy Presented During Initial Walk Through

Final Walk-Through Signed Checklist submitted by Caretaker to Camp Board.

Date Received _____ Email Mail In-Person

Copy of Final Walk-Through Signed Checklist and Contract included with **Payment Invoice**.

Date Invoice Sent _____ Email Mail In-Person

Payment Received: Date _____ Mail In-Person

Cash: _____ OR Cheque #: _____

Designated Caretaker for Rental: _____

Caretaker Contact: Home Phone - _____ Cell Phone - _____

Caretaker Email: _____

Caretaker Honorarium Amount: _____ Cheque #: _____

Name of Board Member Rep reviewing Application & confirming above to be accurate & true:

(Please Print) _____

Board Member Signature

Dated

Additional Notes/Comments: