

2017 FACILITY USE AGREEMENT

ACADIAN BAPTIST CENTER

1202 Academy Drive • Eunice, LA 70535
Phone: (337) 457-9047 • FAX: (337) 457-7421
E-mail: info@ABCCamp.com

Date Issued: _____ Date Received: _____
___ Retreat ___ Meeting ___ Banquet ___ Camp

Conference Type: _____
Sponsoring Church or Organization: _____
Address: _____ Apt: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Cell _____ Fax: _____

Group Leader's Name: _____ Title: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Leader's Cell: _____ Leader's E-mail: _____

Arrangements:

Activity Dates and Times
Time Retreat Starts: _____ AM / PM Time Retreat Ends: _____ AM / PM
First Meal (ex: Friday Dinner): _____ Last Meal (ex: Saturday Dinner): _____

Accommodations:
___ Family Lodge ___ Dormitory ___ R/V Park

Facilities Requested: _____

Special Requests and/or Equipment: _____

Anticipated Attendance: _____ for _____ Nights; _____ Meals @ _____ per person

Deposits:

\$ _____ Family Lodge Deposit of \$10.00 per person per night
\$ _____ Camp Deposit of \$50.00 per person
\$ _____ Retreat (Dormitory) Deposit of \$10.00 per person per night.

Cancellations:

A cancellation request must be postmarked or called in to this office no less than 90 days before the date on which the reservation begins in order to receive full refund of the deposit. Those canceling less than 90 days prior to reservation date will receive no refund.

Confirmation Policy:

ACADIAN BAPTIST CENTER RESERVES THE RIGHT TO REFUSE RESERVATIONS TO ANY GROUP.

... A schedule of planned activities is due in the conference center office **two weeks** prior to event
... To facilitate planning the first meal, a guaranteed number of meals must be given to the ABC office at least 48 hours prior to arrival.

I have read this agreement and the "Policies & Procedures" of Acadian Baptist Center and I agree to the price quoted and to follow the "Policies & Procedures" of Acadian Baptist Center. I realize that we will be financially responsible for any damages to property or facilities. I also understand that our deposit may be held if facilities are not left clean and in as good condition as upon arrival.

Signature of Group Leader: _____ Title: _____ Date: _____
(Please sign and return with deposit as soon as possible.)