

Spirit of Nebraska

Troop Camping Reservation and Rental Agreement

Important: Before filling out this request, please call to check availability (contact information, page 5).

Forms received less than 30 days in advance may decrease fulfillment possibilities.

Your reservation will not be held until we receive this agreement and payment.

Directions: Application is to be completed by contact person and sent to the appropriate camp address (page 5). Please enclose all applicable fees with this form. Applications will not be processed without full payment, including the additional deposit amount. Deposits are refundable in whole or in part depending upon the condition of the equipment and/or facilities upon departure.

I am requesting the following type of stay:

- Day
 Lodge Camping
 Tent Camping

Troop(s) # *(if known)* _____ **Service Unit(s) #** *(if known)* _____

Adult in Charge:

Name: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: H _____ W _____ C _____
Email: _____

Number of Girl Scout members:

Female Adults _____ Male Adults _____
 Daisies *(grades K-1)* _____ Brownies *(grades 2-3)* _____ Juniors *(grades 4-5)* _____
 Cadettes *(grades 6-8)* _____ Seniors *(grades 9-10)* _____ Ambassadors *(grades 11-12)* _____

Number of non-Girl Scout members:

Female Adults _____ Male Adults _____ Children _____

You MUST include a completed Troop Camping Roster. ALL adults supervising girls must be registered Girl Scouts.

Adult and Child CPR and First Aid certified participant:

(This is required. Please submit front and back copy of certifications)

Name: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: H _____ W _____ C _____
Email: _____

Outdoor Trained Adult:

Check all trainings that have been completed

- Explore Out
 Outdoor- Camp Out
 Outdoor- Sleep Out

Name: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: H _____ W _____ C _____

Camp Reservation Request

Standard arrival time for Spirit of Nebraska camps for day use is after 8 a.m. and departure is before 4 p.m. Overnight use arrival time is between 5-6 p.m. and departure time is anytime before 3 p.m. Alternative times may be arranged. (Additional fees may apply, please see Fee Schedule for rates.) Please be aware that camp staff will be available to check you in and out at the times you listed. If you are running behind schedule, please contact staff to make sure that they will be available.

Date(s) _____ Day use or Overnight(s)

Call camp registrar to check available dates (see page 5).

Check-in Time _____ **Check-out Time** _____

(Continued)

Please check all rentals and equipment to be reserved

Camp Site

Lakeview- Hidden Oaks- Cosmo- Catron- Crossed Arrows- Maha-
(Denotes that equipment is available at the above Spirit of Nebraska camp.)

Lodge Or Facility Rental      

Lodge or Facility Preference: _____

\$ _____ Fee + \$ _____ Deposit Fee = \$ _____ Total Fee
(see "Fee Schedule" for lodge or facility information and fees)

Tent Sites including Sky Camp    

Site Preference: _____

\$ _____ Fee + \$ _____ Deposit Fee = \$ _____ Total Fee
(see "Fee Schedule" for information and fees)

Picnic Sites - day use only   

\$15 fee + \$20 deposit = \$ _____ Total Fee
(You hike in and out of the site and carry out trash upon departure.)

Please check all program add-ons you would like to reserve:

 *(Denotes that for your safety these activities require a council-provided facilitator or lifeguard and must be booked at least 30 days in advance to allow time to find the appropriate staff/volunteer.)*

Camp Site

Lakeview- Hidden Oaks- Cosmo- Catron- Crossed Arrows- Maha-
(Denotes that this activity is available at this Spirit of Nebraska Camp.)

Swimming Pool   

Pool Date Preference: _____
 Cost is based upon a two-hour time period and includes lifeguard (see "Fee Schedule" for information and fees).
 Swimming pools are generally open from Memorial Day through Labor Day dependent upon weather, lifeguard availability and conditions.

Check the appropriate number of people who will be swimming.

- | | |
|--------------------------------|---------------------------------|
| Camp Catron | Camp Maha |
| <input type="checkbox"/> 1-25 | <input type="checkbox"/> 1-25 |
| <input type="checkbox"/> 26-49 | <input type="checkbox"/> 26-50 |
| | <input type="checkbox"/> 51-75 |
| | <input type="checkbox"/> 76-150 |

\$ _____ Pool Fee x _____ Number of Days = \$ _____ Total Fee

Circle the time(s) that you prefer:

Noon-2 p.m. 2:30-4:30 p.m. 5-7 p.m.

ARCHERY Requires rental of equipment and instruction by a qualified instructor

Archery Equipment

Archery date preference _____

\$25 (1-10 people) w/archery certified adult

\$3 for each additional participant

\$25 + _____ additional participant x \$3 = \$ _____ Fee

Circle the time you prefer for archery (times may change depending on the size of your group)

9-11 a.m.

1-3 p.m.

5-7 p.m.

Call to make special arrangements for other time slots

Choose one of the two options below:

Archery instruction by Girl Scouts Spirit of Nebraska for 2 hours

\$5 per participant (Minimum \$50 fee charged.)

_____ number of participants x \$5 = \$ _____ Fee

We will provide our own instructor (Please submit front and back copy of certification and complete information below).

Archery Certified Adult: (When not provided by Spirit of Nebraska)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: H _____ W _____ C _____

ROPES/CHALLENGE COURSE

Your safety is very important to us, weather conditions, such as lightning or high winds may cause us to reschedule or delay the activities. Every effort will be made to let you know of cancellations no less than two hours in advance of the event.

Low OR High

Ropes/Challenge Course date preference _____

Low: Grade 2 and up. **High:** Grade 4 and up.

_____ number of children x \$10 = \$ _____ Total Child Fee

_____ number of adults x \$20 = \$ _____ Total Adult Fee

\$ _____ Total Enclosed for Low or High Ropes Challenge Course

You are required to complete lows before moving to high challenge course

Circle the time you prefer for low or high courses (times may change depending on the size of your group)

9 a.m. -12 p.m.

1-4 p.m.

4-7 p.m.

Call to make special arrangements for other time slots

Low AND High

Grade 4 and up.

_____ number of children x \$18 = \$ _____ Total Child Fee

_____ number of non-member x \$28 = \$ _____ Total Adult Fee

\$ _____ Total Enclosed for Low and High Ropes Challenge Course

Circle the time you prefer for low and high courses (times may change depending on the size of your group)

9 a.m. -4 p.m.

1-7 p.m.

Call to make special arrangements for other time slots

ENVIRONMENTAL EDUCATION WORKSHOP (EEWs)

EEW date preference _____ Time _____ Topic _____

\$8 per participant (Minimum \$40 fee charged.) - Call camp contact (page 5) for available topics

_____ number of participants x \$8 = \$ _____ Total Fee

DISCOVERY TUBS LV HO CO CC CA MH

\$15 per tub for a 2 week period - Call camp contact (page 5) for available topics

_____ number of tubs x \$15 + \$25 deposit per tub _____ = \$ _____ Total Fee

COMPASSES CO CC CA MH

_____ quantity x \$25 refundable deposit per compass = \$ _____ Total Fee

PROPANE STOVES & CYLINDERS MH

_____ quantity x \$3 per stove = \$ _____ Total Fee

_____ quantity x \$3 per cylinder = \$ _____ Total Fee

TENTS LV CO CA

\$75 deposit per tent

\$5 per night rental

_____ number of nights x \$5 rental fee + \$75 deposit = _____ Total Fee

Rentals & Equipment Total Fees

\$ _____ (Enclose check or you may call to pay with a credit card.)

Deposits are refundable in whole or in part depending upon the condition of the equipment and/or facilities upon departure. Items will be checked for any damage or breakage, please see "List for Check-out" form.

Catering

Groups may bring in prepared food for events or have their events catered. Caterers must have their insurance and state license on file with Girl Scouts Spirit of Nebraska.

Name of Caterer _____ Phone _____

Cancellation or changes:

If you need to cancel or move a reservation, a written notification (*may be emailed*) must be received as soon as possible in order to receive any part of a refund. The refund amounts and timetable are as follows: *This applies even if you move your reservation.*

6 months in advance = 75% Refund

2 months in advance = 50% Refund

2 weeks in advance = 25% Refund

Less than 2 weeks = 0% Refund

In addition, if you need to make a change or an adjustment to your reservation, that involves facilitators and lifeguards, you may be charged a minimum \$10 fee for every adjustment that requires a change of date or personnel.

Additional Safety Information

Upon arrival, each group will be provided with a camp orientation that will include identification of camp boundaries, behavior expectations, precautions concerning possible hazards, emergency procedures, safety policies and regulations. Each user group is responsible for the provision of first aid including supplies or equipment, emergency care and an emergency vehicle when necessary; this can include professional emergency personnel. Each group is required to have an Activity Permission/Health History card for all minors immediately available.

Policies

Smoking is prohibited at all Spirit of Nebraska properties. Alcoholic beverages are not permitted during troop camping. Caterers must have their insurance and state license on file with Girl Scouts Spirit of Nebraska. Non-prescribed controlled substances are prohibited. Firearms, fireworks and concealed weapons are prohibited on all Girl Scouts Spirit of Nebraska properties. Pets are prohibited. Use of non-passenger or recreational vehicles, such as mopeds and all-terrain vehicles is prohibited. Vehicles must be kept on roadways and parked only in designated areas. All campfires must be supervised by an adult at all times. Personal sports equipment shall be handled and stored safely for the protection of everyone. It is to be used at your own risk and neither Spirit of Nebraska nor its employees are responsible for your safety during its use. Neither Spirit of Nebraska nor its employees are responsible for any lost or stolen personal property.

I have read and understand the above policies. I understand that if anyone in my group does not abide by the policies we may be asked to leave, forfeiting the entire rental fee and deposit.

Signature _____ Date _____

Forms & Payment Enclosed?	<input type="checkbox"/>	Y	<input type="checkbox"/>	N
Roster Enclosed?	<input type="checkbox"/>	Y	<input type="checkbox"/>	N
First Aid and CPR Certification Enclosed?	<input type="checkbox"/>	Y	<input type="checkbox"/>	N
Outdoor Trained Adult	<input type="checkbox"/>	Y	<input type="checkbox"/>	N
Supplemental Insurance (for non-members)	<input type="checkbox"/>	Y	<input type="checkbox"/>	N

Approved on behalf of Girl Scouts Spirit of Nebraska by _____

Date Approved _____

Contact and Reservation Information

Lakeview Cabin

302 West D St.
Ogallala, NE 69153
Camp Contact: 800.458.4467 or LVcampreservations@girlscoutsnebraska.org

Hidden Oaks Cabin

710 E Hwy 20
Valentine, NE 69201
Camp Contact: Mary or Jerry Henderson 402.376.2026 or 402.376.1144

Camp Cosmopolitan

2512 N. Webb Rd.
Grand Island, NE 68803
Camp Contact: 800.627.5940 or COcampreservations@girlscoutsnebraska.org

Camp Crossed Arrows

2121 S. 44th St.
Omaha, NE 68105
Camp Contact: 877.447.5558 x221 or CAcampreservations@girlscoutsnebraska.org

Catron Camp and Retreat Center

609 N. 60th Rd.
Nebraska City, NE 68410
Camp Contact: 888.878.9822 or CCcampreservations@girlscoutsnebraska.org

Camp Maha

2121 S. 44th St.
Omaha, NE 68105
Camp Contact: 877.447.5558 x221 or MHcampreservations@girlscoutsnebraska.org