

RESERVATION FORM - ASSOCIATION GROUPS (Day Use)			
<i>Please complete all information, sign, and return this form & deposit to the Assembly ASAP to secure reservation.</i>			
GROUP INFORMATION	Church/Group:		
	Group Leader:		1 st Date Request: <input type="text"/>
	Event:		2 nd Date Request: <input type="text"/>
	Address:		Best Phone: <input type="text"/>
	City, State, Zip:		Cell Phone: <input type="text"/>
	Email:		
	Arrival Date:	Time: <input type="text"/>	Departure Date: <input type="text"/>

GUESTS BUILDINGS	Number of Day Guests (\$2/person per day plus building rate): <i>Minimum of 20 required</i>		
	BUILDINGS & FACILITIES		Check Buildings/Spaces Requested:
	Tabernacle	\$50 first day/\$35 each subsequent day	
	Pool (seasonal)	\$3 per person/minimum of \$60 per day	
	Big House	\$45	
	Lodge	\$25	
	Cabin 1	\$10	
	Cabin 2	\$10	
	Cabin 3	\$10	
	Cabin 4	\$10	
	Cabin 5	\$10	
	DEPOSIT:	One Day's Rate:	<input type="text"/>

COMPLETION	DEPOSIT ENCLOSED	\$ <input type="text"/>
	(Make check payable to "SAVANNAH BAPTIST ASSOCIATION")	
	Instructions/Notes:	
	1) Mail deposit & signed form to Savannah Baptist Assembly (930 Honey Ridge Rd, Guyton, GA 31312)	
	<i>NOTE: Your reservation is NOT confirmed until deposit is received.</i>	
	2) Reservation deposits are not refundable within 60 days of arrival date.	
	3) Balance due is to be paid to Assembly Director prior to departure.	
GROUP LEADER SIGNATURE*: <input type="text"/>		DATE: <input type="text"/>
*Leader's signature attests that you have read all of <i>Welcome and Policies</i> document and agree to comply with rules and policies of the Savannah Baptist Assembly. As leader, it is your responsibility to familiarize your staff with these policies. Your signature certifies that Child Protection Documents are on file and the Liability insurance is in effect.		

G R O U P I N F O	RESERVATION FORM - ASSOCIATION GROUPS (Overnight Use)			
	<i>Please complete all information, sign, and return this form & deposit to the Assembly ASAP to secure reservation.</i>			
	Church/Group:			
	Group Leader:		1 st Date Request:	
	Event:		2 nd Date Request:	
	Address:		Best Phone:	
	City, State, Zip:		Cell Phone:	
	Email:			
	Arrival Date:		Time:	Departure Date:
				Time:

G U E S T B U I L D I N G S	# of Overnight Guests (\$11/person per night - incl. day usage):			
	<i>Minimum of 20 required</i>			
	Additional Day Guests (\$2/person per day):			
	BUILDINGS & FACILITIES		Check Buildings/Spaces Requested:	
	Tabernacle	\$50 first day/\$35 each subsequent day		
	Pool (seasonal)	\$3 per person/minimum of \$60 per day		
	Big House	(Sleeps 20-35)		
	Lodge	(Sleeps 16)		
	Cabin 1	(Sleeps 8)		
	Cabin 2	(Sleeps 8)		
	Cabin 3	(Sleeps 8)		
	Cabin 4	(Sleeps 8)		
	Cabin 5	(Sleeps 16)		
	DEPOSIT:	June/July/August reservations:	\$500	
		Other months:	\$220	

C A M P I N G	TENT CAMPING (\$4/person per night):	
	No Deposit Required	
	RV CAMPING (\$20/vehicle per night - includes up to 2 people):	
	Additional RV Guests (\$6/person per night):	
No Deposit Required		

C O M P L E T E	DEPOSIT ENCLOSED	\$
	(Make check payable to "SAVANNAH BAPTIST ASSOCIATION")	
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	GROUP LEADER SIGNATURE*:	DATE:
	*Leader's signature attests that you have read all of <i>Welcome and Policies</i> document and agree to comply with rules and policies of the Savannah Baptist Assembly. As leader, it is your responsibility to familiarize your staff with these policies. Your signature certifies that Child Protection Documents are on file and the Liability insurance is in effect.	