

# Reservation Application

Saints Grove Campground  
408 N West Point Rd.  
Glencoe, OK 74032



Date: \_\_\_\_\_

Name of Group: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred method of contact: Call Text Email

Dates Requested: (1<sup>st</sup> Choice) Begin: \_\_\_\_\_ End: \_\_\_\_\_

(2<sup>nd</sup> Choice) Begin: \_\_\_\_\_ End: \_\_\_\_\_

Expected Arrival Time\*: \_\_\_\_\_ Expected Departure Time: \_\_\_\_\_

Type of Function (Family Reunion, retreat, youth camp, etc.): \_\_\_\_\_

Estimated Number of People: Adults: \_\_\_\_\_ Children/Youth: \_\_\_\_\_

Please check "Yes" or "No" regarding what you are including with your reservation application.

	Yes	No
User deposit (\$250)	_____	_____
Life guard certification	_____	_____
Needed facilities sheet	_____	_____
Statement of insurance	_____	_____

Note: Neither the Community of Christ nor the Oklahoma Campground Association (OCA) provides Accident or Health Insurance for those contracting to use the Saint's Grove Campground facilities. Non-Community of Christ users MUST provide proof of \$1,000,000 Liability Insurance Coverage.

\*Please make sure you arrive at this time or provide management with an updated time closer to your event. The group cannot be checked in without the director present. The doors will remain locked until the director arrives.

Make checks payable to: Community of Christ

# Facilities Requested

## Montague Hall

Note: This is a dorm-like facility with 24 separate rooms, each with a bath and two bunk beds (four individual beds). We can accommodate 96 people in this facility. There is also a large dining hall, a kitchen, and an assembly hall/sanctuary with a fireplace within the building.

Please check the facilities you will be needing:

_____ Dining Hall	_____ Intercom System
_____ Kitchen	_____ Sound Equipment (assembly hall only)
_____ Assembly Hall	_____ TV projectors
_____ Number of dorm rooms (1-24)	

## Outside Cabins, Shower House, Classrooms

Note: We have eight 8-person cabins, six 6-person cabins, six classrooms.

\_\_\_\_\_ Number of 8-person cabins  
\_\_\_\_\_ Number of 6-person cabins  
\_\_\_\_\_ Shower House  
\_\_\_\_\_ Number of classrooms

## Additional Facilities

\_\_\_\_\_ Swimming Pool (seasonal, please attach schedule)  
\_\_\_\_\_ Activity Center (gym)  
\_\_\_\_\_ Nursery  
\_\_\_\_\_ Pond Area

**IMPORTANT NOTE:** All areas that you contract for must be cleaned according to the procedures posted in each area. Each event coordinator/director **MUST** assign a person to ensure the clean up chores are accomplished prior to check-out.

I have read all information that has been provided and agree to abide by the terms and conditions stated and to pay the stated fees.

\_\_\_\_\_  
Signature, Event Coordinator/Director

\_\_\_\_\_  
Date