

Camp Hickory Hill

Niagara Frontier Christian Service Camping Association, Inc.
 2970 Kohler Road - Varysburg, NY 14167
 (585) 621-5235 (585) 535-7832

Return Form To:
Larry Adams
134 Delmar Road
Rochester, NY 14616

Name of Group			Group Leader		
Sponsoring Organization			Organization Leader/Contact		
Organization's Phone			Organization's Email		
Organization's Mailing Address			Leader's Phone		
			Leader's Email		
Arrival Date		Projected Arrival Time	am pm	Projected Group Size	
Departure Date		Projected Departure Time	am pm	Minimum Group Size	
Desire Camp Store?	Yes No	Time(s) Desired	*Store times subject to availability*		
Principle Activity of Group					

Facility	Daily (24 hr)	Weekend (48 hr)	Total
Total Facility	\$1599	\$2565	
Wood Stove Cabins (4 available)	# Needed ____ x \$93	# Needed ____ x \$144	
Gas Heated Cabins (8 available)	# Needed ____ x \$103	# Needed ____ x \$160	
Double Cabin (gas heat)	\$206	\$315	
Trinity Lodge	\$237	\$355	
Activities Building & Gym	\$263	\$399	
Cottages (2 available)	\$83	\$134	
Dining Hall	\$93	\$139	
Dining Hall & Kitchen*	\$140	\$206	
Gym Only	\$78	\$140	
Camping – (per person) Shelters Available	# of People ____ x \$6		
Food Service			
		Deposit Received:	
		Balance Owed:	

PLEASE NOTE:
 A non-refundable deposit equal to 20% of your facility reservations must be submitted within 14 days.
 Failure to submit a deposit will result in the forfeiture of the reservation.

PLEASE READ:
 "Camp Hickory Hill: Rules & Responsibilities"

(Please keep a copy of this form for your records.)



Food Service is available for groups of FORTY or more.
 Special group rates are available for whole camp rentals.
 *Dining Hall and Kitchen use with Food Service by Food Service Personnel.
 Dining Hall Fee will be waived with Food Service groups of FIFTY or more.



I/we understand that we will be responsible for the group under our charge. We agree to take responsibility for any damage or loss to camp property. We have reviewed the Rules and Responsibilities provided us on the reverse of this form and agree to uphold them. We are also responsible for any personal injuries to any member of our group, due to negligent or accidental behavior of anyone in our group. We will also release Camp Hickory Hill, its Directors and any employees of any responsibilities from any of the same.

Name of Insurance Carrier: _____ Policy Number: _____
 Signature of Group Leader: _____ Date: _____