



# CAMP DEAN Rental Request

## For Members of Girl Scouts of Northern Illinois

- Please send deposit along with this request to **GSNI attn: Toni 2101 Auburn St. Rockford IL 61103**. At least 3 weeks prior to event, send balance due. Cancellation is automatic if balance is not received in that timeframe.
- Questions should be directed to the Camp Site Coordinator 815-962-5591, Ext. 7162. You may leave a message at any time.
- Cancellation Policy: Cancellations with less than 3 weeks notice or no-show are ineligible for a refund.
- Deposits are CASHED and will be REFUNDED after camp use if: Equipment and facilities are left clean and in good condition, AND procedures and rules are followed, especially with regards to vehicles.

### 1. Building, Tent Unit, or Site Reservations

**Arrival:** date \_\_\_/\_\_\_/\_\_\_ time \_\_\_\_\_ **Departure:** date \_\_\_/\_\_\_/\_\_\_ time \_\_\_\_\_  
 (Arrive between 4 - 6 P.M.) (Must depart by 3 P.M.)

Lodges: \_\_\_ *Dean Lodge* \_\_\_ *Whispering Oaks* (\$50 dep) \$65 first night/\$30 each additional night  
 \_\_\_ *White Tail Lodge* (\$50 dep) \$50 first night/\$25 each additional night

Sleeping Cabins: \_\_\_ *Oak Grove* (\$50 dep) \$40 first night/\$20 each additional night \_\_\_ *Hickory Glen* (\$50 dep) \$30 first night/\$15 each additional night

Platform Tents: \_\_\_ *Cherry Hollow* \_\_\_ *Pine Tree* (\$50 dep) \$30 first night/\$15 each additional night  
 \_\_\_ *Day Use Only* \$20 shelter w/ fire scar

### 2. Program/Activities (Trained facilitator required)

\_\_\_ Archery \_\_\_ Canoeing \_\_\_ Kayaking \_\_\_ Swimming

**3. Fees** Deposit \$50

*Due with this form to hold reservation*

Rental Fees \$ \_\_\_\_\_

Balance Due \$ \_\_\_\_\_

*Due 3 Weeks prior to event*

### 3. Required Information Contact person e-mail: \_\_\_\_\_

Troop #: \_\_\_\_\_ Service Unit: \_\_\_\_\_

CONTACT PERSON: *(someone available during the day, by phone, before the troop comes to camp)*

Name \_\_\_\_\_ Day phone \_\_\_\_\_  
 Address \_\_\_\_\_ Night phone \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

TRAINED TROOP CAMPER: *(Date of Training was: Month \_\_\_\_\_ and Year \_\_\_\_\_)*

Name \_\_\_\_\_ Day phone \_\_\_\_\_  
 Address \_\_\_\_\_ Night phone \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

FIRST AIDER:

Name \_\_\_\_\_ Day phone \_\_\_\_\_  
 Address \_\_\_\_\_ Night phone \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

"BACK AT HOME" Emergency Contact Person: *(during the camping event)*

Name \_\_\_\_\_ Day phone \_\_\_\_\_  
 Address \_\_\_\_\_ Night phone \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Estimate of Participant Numbers

- \_\_\_ Daisy
- \_\_\_ Brownie
- \_\_\_ Junior
- \_\_\_ Cadette
- \_\_\_ Senior
- \_\_\_ Adult

This form must be filled out and returned with the deposit.

Once payment is received in full, you will get a confirmation packet with paperwork to be taken with you to camp.

If there is any problem with the date/site requested, you will be contacted.