



# Mountain View Retreat Center

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We acknowledge that the land on which we gather is the traditional and unceded territory of the Chawuthil Band of the Stó:lo Nation

## 2022 FAMILY/GROUP CAMP APPLICATION FORM

Family/Group Name			Phone Number (home or cell)			Email		
Address (include City and Postal Code on the line above)								
Contact Person			Best Number to reach you at			Alternative Phone Number		

### CHOOSE THE DAYS YOUR FAMILY/GROUP WILL ATTEND

Dates Available for Group/Family Camping are July 3 ~ 7, July 24 ~ 31 and August 14 ~ September 5. Please indicate your Arrival and Checkout Dates below. See Rental Guidelines Document for Check-in and Check-out times.

ARRIVAL DATE:		CHECKOUT DATE:		FAMILY/GROUP SIZE	
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### Accommodations Available

Accommodation Type	Reg. Price	Restart Special	X	# Qty	=	TOTAL	X	# Nights	=	FINAL TOTALS
Cabins	\$82.00	\$50.00	X		=	\$	X		=	\$
RV (15 AMP Power only)	\$27.00	\$18.00	X		=	\$	X		=	\$
RV (15 AMP Power & Water)	\$36.00	\$26.00	X		=	\$	X		=	\$
Camping Spot (No Services)	\$20.00	\$12.00	X		=	\$	X		=	\$
<b>TOTAL for your accommodations</b>										<b>\$</b>

### Additional Services Available

Pavilion /Outdoor Gym	\$114.00		X						=	\$
*Additional Day(s)	\$ 86.00		X						=	\$
Meeting Building (GAP)	\$242.00		X						=	\$
*Additional Day(s)	\$135.00		X						=	\$
Outdoor Amphitheatre	\$ 99.00		X						=	\$
Fire Pit (Includes Wood)	\$ 50.00		X						=	\$

**TOTAL for Additional Services** \$

**TOTAL for Activities** (select from activities listed on page 2) \$

**Sub Total** (Includes Accommodations, Additional Services and Activities) \$

**GST 5%** (of the Sub Total) \$

**FINAL INVOICE TOTAL AMOUNT** \$

**Deposit** (Min 20% / \$500 for Churches/Large Groups \*Enter amount as a - (Minus) \$

**Amount Owing** ~ Please pay the amount on this line ~ Date: \$

**Final Amount Paid** \*due 7 days prior to arrival \* Paid on Date indicated above \$

**FINAL BALANCE** \*Will be \$0.00 balance when final payment is made \$

### Payment Information

Visa/MC #	/	/	/	Exp. Date	/	CVV#	
Card Holder Signature				Card Holder Name ~ Please Print			

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<b>List each participant in your Family/Group below</b>							
(include the age for those 19 years and younger *use an additional sheet of paper for additional names) (List Parent/Contact person first as the 1 <sup>st</sup> Participant)							
Participant Names	Age	Waiver	Participant Names	Age	WAIVER		
1.			5.				
2.			6.				
3.			7.				
4.			8.				
ACTIVITIES							
Activity	Price	#	TOTAL	Activity	Price	#	TOTAL
Archery ~ 11+ (4)	\$11.00	X	= \$	Horse Ring Rides (4)	\$22.00	X	= \$
Axe Throwing ~ 11+ (4)	\$11.00	X	= \$	Swimming (10)	\$ 6.00	X	= \$
Horse Trail Rides ~ 10+ (4)	\$60.00	X	= \$	Water Sports (4)	\$55.00	X	= \$
Choose the number of Canoes ~ Max 3 persons/Canoe* Comes with 2 Lifejackets							
Canoeing (2)	\$42.00	X	= \$	Extra Life Jackets	\$ 5.00	X	= \$
<b>*Note: Minimum required for each activity above in brackets: Ex (4)</b>				<b>TOTAL for ACTIVITIES</b>			<b>\$</b>
<b>*Indicate below which day(s) you want your activities. *Time and days will be determined based on staff available.</b>							
1. Activity _____	Day	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
2. Activity _____	Day	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
3. Activity _____	Day	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
4. Activity _____	Day	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
5. Activity _____	Day	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
6. Activity _____	Day	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
<b>*If there are more than 6 different activities, list them on a separate piece of paper.</b>							
<b>*Minimum</b> number of people (as indicated in brackets) is needed in order to provide staff supervision. Does not have to be from the same family/group.							
<b>*Canoeing</b> cost is \$42.00 per canoe. A maximum of 3 people in a canoe. A minimum of 2 canoes must be requested in order to provide staff supervision. Does not need to be from the same family/group.							
<b>*Additional Life Jackets</b> ~ 2 life jackets are included in the price of a canoe. Additional Life Jackets are available for \$5.00.							
<b>*If the same activity</b> is requested more than once, please include total number (example: if 2 people want Horseback Riding 2 times, then the total number of participants would be 4)							

**Registration Documents Required:**

- 2022 Family/Group Application Form
- 2022 MVSC WAIVER (for each participant)
- 2022 MVSC Agreement – Family OR
- 2022 MVSC Agreement – Group/Church
- 2022 MVSC Pet Agreement (1 for each pet)

**I have read and understand the following documents:**

- 2022 Rental Guidelines
- 2022 COVID Rules
- 2022 Camping Requirements
- 2022 Pet Policy (If applicable)

*\*Please include all applicable documents listed in the left column (Note: Check either the Agreement for Families OR for Groups ~ not both. Pet Agreement for each Pet attending ~ if no pets are coming, leave this check box blank.*

\_\_\_\_\_  
Group Leader Signature

\_\_\_\_\_  
Date