



Camp Wilbur Herrlich
 101 Deacon Smith Hill Road
 Patterson, NY 12563
 Ph (845) 878-6662 Fax (845) 878-2030

USER GROUP CONTRACT

DATE SENT

PLEASE RETURN BY

1 GROUP CONTACT INFORMATION			
Name of Organization (This Organization is herein know as the "Renting Organization")			Group Type
Mailing Address		State	Zip Code
Contact Person	Phone 1	Phone 2	Email Address

2 EVENT DATES			
Arrival Date	Arrival Time	Departure Date	Departure Time Morning

3 ACCOMMODATIONS AND GROUP SIZE					
	Est. # of Guests	Age	Lodging	Price per Guest	Totals
Nights					
Meals					
First Meal					
Last Meal					
TOTAL ESTIMATED GUESTS				TOTAL ESTIMATED COST	

4 PAYMENT COMMITMENT	
Contract Deposit	The Renting Organization agrees to pay the Contract Deposit at the time this Contract is signed and returned.
Guaranteed Min. Payment	IMPORTANT:
FINAL PAYMENT: The Renting Organization agrees to pay the Final Payment prior to or upon the Arrival Date of the event.	

5 CANCELLATION DATES AND DETAILS	
FIRST Cancellation Date Not Applicable	Contract and Deposit Due Date. If the Renting Organization cancels the event after the FIRST cancellation date, but before the SECOND cancellation date, the Renting Organization will receive in return the Contract Deposit minus \$100.00.
SECOND Cancellation Date Not Applicable	Six months prior to the Arrival Date. If the Renting Organization cancels the event after the SECOND cancellation date, but before the THIRD cancellation date, the Renting Organization will lose the entire contract Deposit. *
THIRD Cancellation Date Not Applicable	IMPORTANT: Four months prior to the Arrival Date. If the Renting Organization cancels the event after the THIRD cancellation date, the Renting Organization will be responsible for paying the Guaranteed Minimum Payment.*
* If the Renting Organization cancels the event, we make every effort to schedule another group as a replacement to reduce the canceling costs.	

6 CONTACT DATES	
FIRST Contact Date	This signed contract, the Contract Deposit, and the Certificate of Added Insurance are due on this date.
SECOND Contact Date	Six weeks prior to the Arrival Date. Please contact Camp Herrlich by phone or email by this date concerning the current status of the Total Estimated Guests.
THIRD Contact Date	One week prior to the Arrival Date. Please contact Camp Herrlich by phone or email concerning the final guest count and final accommodation and recreation details.

Signature: Contact Person

Date

Signature: Executive/Director

Date

Print Name: Contact Person

Print Name: Executive/Director

REGULATIONS & POLICIES

In accordance with prevailing insurance regulations, our accreditation status through the American Camping Association and operating permit policies issued by the Putnam County Department of Health, the following regulations and recommended policies will apply to all groups and/or individuals renting/using the Camp Herrlich facility. Please indicate your acceptance of these by signing where indicated below.

As an acting representative / Group Leader in charge of the listed Organization or collection of individuals using Camp Herrlich facilities, I agree to the following:

- 1) **Prior to use of the premises, the organization agrees to provide Camp Herrlich with the following evidence of insurance:**
 - a) **Certificate of Comprehensive General Liability insurance including contractual liability for bodily injury and property damage in an amount not less than \$1,000,000 combined single limit or \$1,000,000 bodily injury and \$100,000 property Damage with Mt. Tremper Outdoor Ministries AND Camp Herrlich named as added insured using the camp address. No exceptions, please.**
 - b) **Workers Compensation certificate. (If the organization employs staff or volunteers on the above-described premises)**
- 2) **No alcohol is permitted anywhere on camp premises.**
- 3) **No smoking is allowed on camp property. This is a tobacco free facility.**
- 4) **Youth under 16 must have adult supervision at all times.**
- 5) **No swimming/boating without Certified Lifeguard and adult supervision.**
Lifeguard must have ARC waterfront training and proper rating (training and experience) for canoe's and rowboats.
- 6) **All boaters must wear a life vest at all times.**
- 7) **Absolutely no entry into locked camp buildings.**
- 8) **Camp property must be left in the same condition as found.**
- 9) **All participants will be made aware of this agreement**
- 10) **All participants have had the opportunity to read and understand the rules and regulations outlined in this agreement, Camp Herrlich staff understandings, prior meeting understandings, and have agreed to adhere to them. They furthermore agree to adhere to all direction given by the Camp Herrlich Directors.**

FOR SIGNATURE OF ACTING REPRESENTATIVE OF ATTENDING GROUP:

HOLD HARMLESS AGREEMENT

I, _____, acting as representative for [applicant], while utilizing portions of the premises known as Camp Herrlich located at 101 Deacon Smith Hill Road, Patterson, County of Putnam and State of New York, understand and hereby irrevocably covenant, promise and agree to indemnify the said Camp Herrlich and Mt. Tremper Outdoor Ministries and to hold Camp Herrlich and Mt. Tremper Outdoor Ministries harmless from and against any and all losses, claims, expenses, suits, damages, costs, demands or liabilities, joint or several, of whatever kind or nature which Camp Herrlich and Mt. Tremper Outdoor Ministries may sustain or to which Camp Herrlich and Mt. Tremper Outdoor Ministries may become subject arising out of or relating in any way to our use of Camp Herrlich facilities and premises and camp regulations and policies by our employees, members, guests, and invitees between the dates of [start date] and [end date], and including, without limitation, in each case attorneys' fees, costs and expenses actually incurred in defending against or enforcing any such losses, claims, expenses, suits, damages or liabilities.

NAME OF ORGANIZATION/CHURCH _____

Signature _____ Printed Name _____ Date _____