

PINE BLUFF 4-H CAMP
2672 River Road, Decorah, IA 52101
NONPROFIT – DAY ONLY AGREEMENT
(4-H/FFA, Schools, Scouts, Youth Group, etc.)

\$3/person/day
Maximum \$150/day
Includes use of Kitchen Facility, Restrooms, and Greenspace

Return agreement to Winneshiek Co. Extension, 2316 Sweet Parkway Road, Decorah, IA 52101

Name of group or activity: _____

Print name of contact person: _____ **Signature:** _____

The above signature certifies to the conditions stated on this camping agreement for the use of the camp.

Address: _____

Telephone: (_____) _____ - _____ **Cell Phone:** (_____) _____ - _____

Chaperone(s) of this event --- Who is the event's contact person?

Name: _____ **Cell Phone:** (_____) _____ - _____

Arrival Date: _____ **Approximate Arrival Time:** _____

Departure Date: _____ **Approximate Departure Time:** _____

Estimated number of adults: _____ **Youth:** _____ (for camp records)

AVAILABLE ACTIVITIES: Check activities that will be used:

- _____ Nature Trail Hiking
- _____ Tubing
- _____ Fishing
- _____ Outdoor Cooking
- _____ Softball
- _____ Volleyball
- _____ Campfire Program
- _____ Other-- _____

ALL PETS must be on a leash at **ALL TIMES**. Campers must clean up after their pets.

The above signature certifies that the above-names/group(s) or organization abides by the following:

1. Does not discriminate against any individual based on that person's race, color, religion, sex, disability, age, or national origin.
2. Will indemnify and hold harmless the Winneshiek County 4;H Foundation, Pine Bluff Board, Officers, Directors, Agents, and Employees from any and all claims arising out of the use of Pine Bluff 4-H Camping Facilities.
3. Is responsible for leaving the camp as found. Dispose of all trash. In the event of any damage, above-said parties will be held responsible.

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SAMPLE REMITTANCE FORM

Please fill out completely. After your event, contact the Extension Office, 563-382-2949, to verify your payment. Payment is due at the time of the event unless other arrangements have been made.

Name/Group Name: _____

Date	Number of Campers on this Day	\$3/person/day Maximum \$150/day	Total Due
<i>Example:</i> 7/20/20	25	\$75.00	\$75.00
		TOTAL DUE FOR THIS EVENT	

Make checks payable to **PINE BLUFF 4-H Camp** and mail to:
Winneshiek County Extension
2316 Sweet Parkway Road
Decorah, IA 52101

Business Hours: Monday – Thursday, 8:00 am – 4:30 pm; Friday, 8:00 am – 12:00 pm

Thank you for your support of the Pine Bluff 4-H Camp!