

PINE BLUFF 4-H CAMP
 2672 River Road, Decorah, IA 52101
Pinebluffcamp.com

OVERNIGHT CAMPING REMITTANCE FORM

THIS FORM MUST ACCOMPANY General or Non-Profit DAY-USE AGREEMENT & FEES.

Check-out time is 11:00 a.m. for overnight campers.

Please fill out completely. Call the Winneshiek County Extension Office at 563-382-2949 or email pinebluff4h@gmail.com with questions.

Name or Name of Group: _____

Date of each Night	Number of Cabins @ \$60	Number of Non-Electric Sites @ \$15	Number of Electric Sites @ \$30	Number of Bring-Your-Own Air Conditioners @ \$20/unit/day	Due
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
	__ x \$60 = \$ ____	__ x \$15 = \$ ____	__ x \$30 = \$ ____	__ x \$20 = \$ ____	\$ ____
Total Amount from Day Use Form: \$200/day Sun.-Thurs. or \$275/day Fri.-Sat.					\$ ____
Grand Total:					\$ ____

EXAMPLE: Date of each Night	Number of Cabins @ \$60	Number of Non-Electric Sites @ \$15	Number of Electric Sites @ \$30	Number of Bring-Your-Own Air Conditioners @ \$20/unit/day	TOTAL
7/20/24	2 x \$60 = \$120	3 x \$15 = \$45	1 x \$30 = \$30	2 x \$20 = \$40	\$235
7/21/24	2 x \$60 = \$120	3 x \$15 = \$45	0 x \$30 = \$0	2 x \$20 = \$40	\$205
Total Amount from Day Use Form (\$200/day Sun.-Thurs. or \$275 Fri.-Sat.):					\$550
Grand Total:					\$990