



Laurel Ridge Mission Camp 2012 Group Deposit Form



124 Pendry Drive, Laurel Springs, NC 28644, 1-888-831-5922

Group _____

Contact person _____

Phone _____ **Alternate phone** _____

Email _____

Mission Camp session:

- ____ Week 1- June 17-22
- ____ Week 2- July 1-6
- ____ Week 3- July 8-13
- ____ Week 4- July 22-27
- ____ Week 5- July 30- August 3

Number of reservations:

- ____ youth
- ____ adults

A registration deposit of \$182.50 per person must be received by **March 15** to hold the reservation, with the remaining \$182.50 due by **June 1st**. Please do not ask participants to register as individuals or forward individual payments to Laurel Ridge.

Number of adults _____ x \$182.50 = \$ _____

Number of youth _____ x \$182.50 = \$ _____

Total group deposit due \$ _____

We will be hiring staff, purchasing materials & supplies and establishing work sites based on registration numbers so please note that deposits are **NON-REFUNDABLE**.