



CAMP TAWINGO OUTDOOR CENTRE

DAY VISIT GROUP BOOKING CONTRACT

CONTACT INFORMATION

Name of Group: _____

Mailing Address: _____ City: _____

Postal Code: _____ Telephone: _____ Fax Number: _____

Group Representative: _____ E-mail: _____

BOOKING DETAILS

Total Number at Camp (including Supervisors)

Camper Count (Males): _____ Camper Count (Females): _____

Grade Level(s): _____ Age Range: _____

Male Supervisors: _____ Female Supervisors: _____

NOTES for OFFICE USE

SIGNATURE: _____ DATE: _____

Visit: Date: _____ Approximate Arrival Time: _____ Approximate Departure Time: _____

Meal(s) provided by Camp: None Snack Breakfast Lunch Supper

The Group identified on the first line of this Agreement (the "Licensee") will indemnify and hold harmless Jack Pearse Limited, its officers, directors, agents, employees and shareholders (the "Licensor") from and against all claims, loss or expenses arising out of, from, or in connection with the licensing and use of the premises located at 1844 Ravenscliffe Rd., Huntsville, Ontario, P1H 2N2 (the "Premises"), related operations, locations and equipment. Such indemnity applies to (i) any act, omission or negligence of the Licensee or any of the partners, directors, officers, agents, employees, invitees, customers, or contractors of the Licensee; (ii) the conduct or management on the Premises or of any business therein, or any work or thing whatsoever done, or any condition created in or about the Premises during the term of this agreement; and (iii) any accident, injury or damage whatsoever occurring in or at or about the Premises. Licensee hereby expressly indemnifies the Licensor for the consequences of any act, omission or negligence of the Licensee, unless and to the extent such act or omission is due to the gross negligence or intentional willful misconduct of the Licensor.

- I understand that both deposit and contract must be in hand at Camp Tawingo in order to secure a booking.
- I have read and understand the billing arrangements that accompany this contract page.
- I understand and agree to abide by the policies outlined in Camp Tawingo's current Policy and Planning Booklet. (Please review this document on line or request a copy, prior to booking)

Signature of Group Representative

Date

If you do not receive confirmation of receipt of this contract or any other change to your booking within two weeks, please contact the Camp Tawingo Office.

PREFERRED PAYMENT OPTION

[] Visa [] MasterCard [] Enclosed cheque or money order in Canadian Funds payable to CAMP TAWINGO

Card Number _____ Expiry Date _____ Amount of Payment: \$ _____

CVV: _____ Name on Card: _____ Signature: _____