

Ingalls Creek

12355 Ingalls Creek Rd., Peshastin, WA 98847

2017 USER AGREEMENT

Reservations are subject to Ingalls Creek management confirmation and approval.

Organization: _____

Address: _____ City _____ State _____ Zip _____

Contact Name _____ Contact Phone No. _____

Contact E-Mail: _____ Alternate Phone No. _____

Expected Arrival Date _____ Arrival time: _____

Departure Date: _____ Departure time: _____

Type of Group: _____

(Non-Profit: Adult, Youth, Mixed Ages, Other: Private Family, Corporate, etc...)

We expect between (minimum and maximum) total number of people _____ -- _____ people

Facilities Requested

_____ Lodge (Gathering room, commercial kitchen, locker/restrooms rooms)

_____ Dormitories & Lupine Suite: (Sleeps 36 total) Dorms sleep 32 (16 stacked bunkbeds),

Lupine Suite sleeps 4 (1 queen plus 2 ground level bunk beds), private bed/bath room and tub/shower

_____ Alpine Apt-sleeps 4 (1 Q, 2 stacked bunk beds), private bed/bthrm w/shower, kitchen/ dining/living area

_____ Bray Cabin (sleeps 11) separate building: 2B/2 bths: (2 Q beds, loft w/ twin over full bunk, 2Q slpr sofas)

Full kitchen, laundry, dining room, living room

_____ Camping: Number of camp sites needed: _____ Approximate number of people: _____ (5 p/camp site)

_____ Day Use Only: (no overnight stay) Amphitheater _____ Gazebo/Picnic Area _____ Lodge _____ Other _____

In addition to this "User Agreement" your group is required to provide a Certificate of Insurance. This certificate is obtained from your insurance company. It must list Ingalls Creek Enrichment Center as additional insured and include the dates that you will be using our facility. It should be emailed us at least one week prior to your event.

To Reserve: Return this form to hold your dates for two weeks on the Ingalls Creek Calendar

Confirm: Send in your Deposit to confirm/ hold your reservation (Please see fee schedule for deposit amount.)

Payment: Balance of your retreat payment is due after your stay. You will receive an invoice for actual number of guests who attended.

Cancellation Policy: Deposits are NON-REFUNDABLE within 60 days of the event.

Contact Guest Services Manager Karen Brown with questions 509-548-3306 or email registrar@ingallscreek.org

The undersigned agree to indemnify and save Ingalls Creek Enrichment Center or any lessees harmless from any and all loss or liability arising from the use or occupancy of the Ingalls Creek premises, including Bray Cabin, by any persons whomsoever during the time Ingalls Creek is used or occupied by the undersigned group. This indemnification extends to Alanna's Landing if used during the Ingalls Creek event.

We, _____ agree to the conditions, rules and standards see attached.

Signed: _____ Date: _____

Print Name: _____ Position: _____

Address: _____

Phone: _____ E-Mail: _____

Please sign and return along with the damage/reservation deposit to: Guest Service Manager at Ingalls Creek Enrichment Center, 12355 Ingalls Creek Road, Peshastin, WA 98847 email: registrar@ingallscreek.org

*Please Note : Ingalls Creek reserves the right to deny use or to terminate use privileges to any group or individual that the Ingalls Creek board or its representative determines to be harmful to facilities, ministries, or purposes of Ingalls Creek *, including disruptive or undesirable behavior impacting neighbors, or other users.*

**Ingalls Creek purposes are stated in the bylaws of Ingalls Creek Center, with particular emphasis on Article IV, Tenets of Faith, and in the Ingalls Creek vision statement, available on request.*