

# WEEKI WACHEE CHRISTIAN CAMP

OWNED BY MEMBERS OF THE CHURCH OF CHRIST

DONATION GUIDELINES EFFECTIVE May 1, 2005  
RESERVATIONS MUST BE MADE WITH THE CAMP MANAGER  
BY CALLING (352) 596-2326 OR (727) 418-2273

**Children 6 and under are free with parents/guardians**  
**\$10.00 RETURNABLE KEY DEPOSIT will be collected for each key loaned.**

GROUP CAMPING	\$ 6.00 / night per person
CABIN CAMPING (WITH BUNKS ONLY) ***SEE NOTES AT BOTTOM***	\$ 25.00 night up to four people/ \$6.00 per person over four
CABIN CAMPING (WITH BATHROOMS)	\$40.00 night up to four people/ \$6.00 per person over four
RV HOOK-UP	\$25.00 / Night (2 People) \$5.00 Each Additional
TENT CAMPING	\$20.00 / night up to 4 people \$5.00 / person/ night each additional person
PICNICKING	\$ 5.00 / Person
DINING HALL RENTAL	\$ 250.00 Minimum For Groups Under 42

\*\*\*\*\* A MINIMUM OF 60 PEOPLE IS REQUIRED TO RENT THE FULL FACILITIES, LESS THAN 60 MAY REQUIRE SHARING FACILITIES WITH ANOTHER GROUP. RESERVATIONS FOR JUNE, JULY, AND AUGUST REQUIRE A \$500.00 DEPOSIT FOR EACH WEEK RESERVED. NO WEEK WILL BE CONFIRMED WITHOUT PROPER DEPOSIT. RENTALS FOR WEEKENDS ,FROM SEPTEMBER THROUGH MAY, REQUIRE A \$50.00 DEPOSIT.

THE CAMP IS NOT RESPONSIBLE FOR DEATH OR INJURIES INCURRED WHILE USING THESE FACILITIES. EACH CAMPER OR GROUP OF CAMPERS MUST SECURE THEIR OWN INSURANCE. THE CAMPERS OWN HEALTH INSURANCE WILL BE RESPONSIBLE FOR ALL INJURIES. THE CAMP DOES NOT PROVIDE A LIFE GUARD OR HAVE ANY CONTROL OVER THE DEPTH OR CONDITIONS OF THE WATER IN THE RIVER.

CHECK OUT TIME FOR WEEKLY SUMMER RENTAL IS SATURDAY AT 11:00.

WE REALLY CARE ABOUT YOUR CAMP EXPERIENCE AND WOULD LIKE TO HEAR FROM YOU. PLEASE WRITE AND TELL US ABOUT YOUR LIKES AND DISLIKES. THE DONATIONS WE COLLECT FROM USE ONLY COVER ABOUT HALF THE COST OF KEEPING THIS CAMP. DONATIONS FROM CONGREGATIONS AND OTHERS HAVE TO MAKE UP THE OTHER HALF. PLEASE HELP US KEEP THE CAMP NICE. IF YOU WOULD LIKE TO HELP MAINTAIN THE CAMP AND MAKE IT NICER PLEASE FEEL FREE TO INCLUDE ANY EXTRA DONATION YOU WOULD LIKE OR OFFER TO HELP AT THE NEXT WORK PARTY. IT WILL BE MUCH APPRECIATED. THIS IS TRULY A NON-PROFIT CAMP.

MAIL DEPOSITS AND COMMENTS TO: CHRISTIAN ACTIVITIES INC.  
P.O. BOX 222  
PINELLAS PARK, FL 33780-0222

I HAVE READ THE SUGGESTED DONATION LIST AND STATEMENT. I UNDERSTAND THAT THESE ARE THE DONATIONS TO USE THE CAMP. I UNDERSTAND I MUST PROVIDE MY OWN INSURANCE AND I AGREE TO THIS.  
THANK YOU

GROUP NAME \_\_\_\_\_ Insurance Carrier \_\_\_\_\_

SIGNED \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Coverage Amounts \_\_\_\_\_