

# NORTHERN VIRGINIA LIONS YOUTH CAMP, INC.

## Request For Use Application

Name of Organization: \_\_\_\_\_

Arrival Date: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

Departure Date: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_ Event Type: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Onsite Person in Charge Name: \_\_\_\_\_

(This person to be on site during the entire event and will be sent the confirmation.)

Phone Res: \_\_\_\_\_ Cell/Bus Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Organization's Responsible Person: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Res: \_\_\_\_\_ Cell/Bus Phone: \_\_\_\_\_ Email: \_\_\_\_\_

No. Attending Youth: \_\_\_\_ No. Attending Adult: \_\_\_\_ Total No. Attendees: \_\_\_\_ (Limit 150 people total)

Facilities Requested: Check all that apply. \* Denotes Occupancy limits.

|                              |                                 |                                       |
|------------------------------|---------------------------------|---------------------------------------|
| Amphitheater                 | Arcola Learning Center *        | Bailey's Cross Roads Host Cabin (14)* |
| Clifton Cabin (22)* 2 rooms  | Durant Hall with Kitchen (49) * | Park West Cabin (20)* 2 Rooms         |
| Pavilion                     | Fairfax Host Cabin (12)*        | Tent Camping Area # 1                 |
| Tent Camping Area # 2        | Tent Camping Area # 3           | Vienna Host Cabin(18)*                |
| Warrenton Sunrise Cabin (8)* | Woodbridge Cabin (20)*          |                                       |

- The NVLYC insurance company requires that Camping organizations provide a copy of a "Certificate of Liability Insurance". This needs to be in the hands of the camp scheduler before your request can be confirmed. The user's fees must be in the hands of the camp scheduler one week before the start date of your event.
- **Family pets are not permitted on the Northern Virginia Lions Youth Camp, Inc. property. Service animals are permitted.**
- User/Camping Fee Schedules: Use of the camp requires a \$100 refundable security deposit: refunded (by applying to the camping fee) if no destruction is incurred at the camp: forfeited if destruction is incurred at the camp. The caretaker will inspect the camp after the outing and report the finding to the camp board for their decision.
- Use of the facilities requires a \$100.00 security deposit which must accompany your reservation. The security deposit will be refunded (by applying to rental fee) if no destruction is incurred to the camp facilities. The caretaker will inspect the facilities after the outing and report the finding to the camp board for their decision.
- Camping Fees are \$8.00 per night per camper. This fee includes the use of all the facilities. i.e. Arcola Learning Center, Durant Hall and all other facilities.
- Campers will need to bring mattresses (if desired) as they are not provided in cabins.
- Kitchen and Toilet supplies, i.e. soap, toilet tissue, and hand towels, etc., must be provided by the camping group.

# **NORTHERN VIRGINIA LIONS YOUTH CAMP, INC.**

## **Request For Use Application (Cont.)**

I have read and understand the above rules of the Northern Virginia Lions Youth Camp, Inc. and agree to these rules. I will be in attendance at the Northern Virginia Lions Youth Camp, Inc. and will be responsible for the youth and adults present. Further, as the authorized representative of the organization using the facilities and grounds of the Northern Virginia Lions Youth Camp, Inc. (also referred to as the Youth Camp), I agree that my organization shall indemnify and hold harmless and defend the Youth Camp, its members, officers, employees and authorized representative against any liability for any suits, actions or claims for injuries or damages of any character arising from or relating to the use by my organization or its employees, agents or representatives of the land, improvements or facilities of the Youth Camp.

Organization's Representative Type or Print Name:

\_\_\_\_\_

\_\_\_\_\_

Organization's Representative Sign

\_\_\_\_\_

Date:

Mailing Address: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email address: \_\_\_\_\_