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Contract Request

Retreat Name: South Pacific Christian and Missionary Alliance Winter Camp

Church Name:

Today’s Date:

How did you hear about us? RETURN WEB MAILING REFERRRAL OTHER

Event Contact Name: Phone:

Email: Fax:

Mailing Address:

Retreat Dates: Feb. 25-27, 2022 Arrival Time: 3pm Departure Time: 11am

How many will attend the retreat:

Group Type: JH and HS

Number of Nights\_2\_\_\_ Number of Meals: \_\_5\_\_\_ Starting with: Dinner

Ending with: Breakfast

Additional notes for contract\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your group have any dietary restrictions due to religious beliefs?

Please email to [info@idyllwildpines.org](mailto:info@idyllwildpines.org)

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**For Office Use Only**

Meeting Hall: Chapel Gilboa Hall McNeil Hall Scott Hall Schlenz Hall

Camp: Ridge Camp Meadow Camp Emerson Lodge Creekside Camp Creekside Lodge