

# CALIMESA SDA CHURCH PSR RETREAT RESERVATION FORM      April 26-28, 2019

<b>Office Use Only</b>	
Last Name	_____
Date Rec'd	_____
Amount Rec'd	_____

**Check In: Friday 3:30pm Check Out: Sunday 10:30am**

- \* Make checks payable to **Calimesa SDA Church**
- \* Please submit form and full payment by **April 17**
- \* Any questions please contact:  
Rhonda Wilson: [CalimesaPSR@gmail.com](mailto:CalimesaPSR@gmail.com) or 909-434-5963 (cell)

**Mail form and check to:**  
**Rhonda Wilson**  
**820 Buckingham Dr.**  
**Redlands, CA 92374**

**GUEST INFO:** Please print clearly and list every person in your group. No charge for children 3 and under. Please use one form per room. Please note any special request at bottom of page. **NO DOGS ALLOWED**  
**\*\* Please note age of guests 0-18 years old after their name\*\***

<b>Last Name:</b> _____	first name _____
first name _____	first name _____
first name _____	first name _____
first name _____	first name _____
first name _____	first name _____
Home phone _____	Cell phone _____
	Email _____

**LODGE:** includes 2 nights, 5 meals, 2 queen beds and trundle bed.

- 1 adult \$197
- 2 adults \$128/person x 2 = \$256
- 3 adults \$107/person x 3 = \$321
- 4-6 adults \$96/person x # of adults \_\_\_\_\_ = \$\_\_\_\_\_
- children (4-12yrs old) \$55/child x # of children \_\_\_\_\_ = \$\_\_\_\_\_

**Lodge total: \$ \_\_\_\_\_**

**CABIN:** includes 2 nights, 5 meals, 8 bunk beds, and 1 queen bed (linens not included)

- 1-4 adults \$70/person x # of adults \_\_\_\_\_ = \$ \_\_\_\_\_
- 5-10 adults \$62/person x # of adults \_\_\_\_\_ = \$ \_\_\_\_\_
- child (4-12yrs old) \$50/child x # of children \_\_\_\_\_ = \$ \_\_\_\_\_

**Cabin total: \$ \_\_\_\_\_**

**RV & TENTS:** Site only. Meal requests additional. Limited RV hook-ups are on a first come basis.

	<u>Fri night</u>	<u>Sat night</u>		
# of RV sites	_____	_____	x \$25 per night	= \$ _____
Tent: # of people	_____	_____	x \$6/person, per night	= \$ _____

**RV/Tent Meals:** price is per person/per meal (pp/pm). Children 4-12 years old

	Friday	Sabbath		Sunday	
	<u>Dinner</u>	<u>Breakfast</u>	<u>Lunch</u>	<u>Dinner</u>	<u>Brunch</u>
# of adults	_____	_____	_____	_____	_____
# of children(4-12yrs)	_____	_____	_____	_____	_____
					x \$12pp/pm = \$ _____
					x \$10pp/pm = \$ _____

**Total RV/Tent & Meals \$ \_\_\_\_\_**

**DAY GUESTS:** cafeteria meals - price includes camp insurance/day fee

Sabbath	# of adults _____	x \$18 per person	= \$ _____
Lunch Only:	# of children (4-12yrs) _____	x \$16 per child	= \$ _____
Sabbath Lunch	# of adults _____	x \$27 per person	= \$ _____
& Dinner:	# of children (4-12yrs) _____	x \$23 per child	= \$ _____

**Total Day Guest Meals: \$ \_\_\_\_\_**