

1921 Line 37, New Hamburg, ON, N3A 4B5 - 519-625-8602 -- info@hiddenacres.ca -- www.hiddenacres.ca

RENTAL AGREEMENT & WAIVER - SCHOOL GROUPS

NAME OF GROUP	CONTACT PERSON
ADDRESS	CITY
POSTAL CODE	EMAIL
PURPOSE OF EVENT	PHONE
DATE(S) REQUESTED	ANTICIPATED ATTENDANCE
ARRIVAL TIME	GRADE(S)
DEPARTURE TIME	DEPOSIT ENCLOSED (\$100/day): AMT. \$

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All school groups are	required to provide a certificate of lia	oility insurance from you	r insura	ince company in o	rder to
use Hidden Acres:	☐ COPY ENCLOSED	WILL SEND COPY PRIOR	R TO RE	ENTAL DATE	

CHECK THE APPROPRIATE BOX(ES) FOR ACCOMMODATIONS AND PROGRAMMING REQUESTED:

Programming:	Overnight Accommodations:
Archery	Woodhouse
Arts and Crafts	Stonehouse
Canoeing	Pineview
Climbing Wall (additional charge of \$3.50/student)	Hilltop Cabin
Imagination Station (Drama)	Oakview Cabin
Low Ropes	Camping
Nature Exploration	
Orienteering	Day Use:
Outdoor Skills - Cooking	
Outdoor Skills - Shelter Building	Grounds only - \$5/person
Spaceship Earth	Focus Shelter kitchen - \$25/day
Sports	Meals provided: *
Swimming	Mieais provided.
Team-Building	No
The Ripple Effect (additional charge of \$3.50/student)	Yes
Wide Game	* Groups must help with clean up and dishes
Evening program (\$5.50/student)	unless other arrangements have been made.

*1 TEACHER/VOLUNTEER FREE FOR EVERY 10 STUDENTS.

We are pleased to serve by allowing your group the use of Hidden Acres' facilities and by offering our help in whatever way we can to make your stay enjoyable and meaningful. We feel confident that by cooperation between your leadership and ours, this will be accomplished. To that end, we welcome any requests or comments that you might have, and ask that you abide by our policies and guidelines. If you have any special requests, comments or questions, please include them here:

TO CONFIRM YOUR RESERVATION, PLEASE SIGN BELOW AND RETURN THIS FORM WITH YOUR RESERVATION DEPOSIT. KEEP A DUPLICATE FORM FOR YOUR RECORDS.

I have read the attached rates form and policies, and agree to abide by them. I will inform all members of the group of these policies and we will undertake to conduct our activities in a safe and careful manner. I, and our group, understand that there are inherent and unforeseen risks involved while participating in a retreat at Hidden Acres. We also understand that Hidden Acres has done what it can to minimize the risks associated with visiting the camp and we assume the risks involved. I assume full responsibility for the conduct of our group and for their safety. I agree, on behalf of the group, that we will not hold Hidden Acres Mennonite Camp Inc., its board members, staff, or volunteers liable in any way for any accidents which may happen while we are using the camp. I freely and willingly sign this agreement and waiver on behalf of my group.

SIGNED	DATE		
	FOR OFFICE USE ONLY		
DEDOCIT DECEIVED (DATE):	AMOLINT:	January 2022	