

MAILING ADDRESS: PO BOX 23580, LEXINGTON, KENTUCKY 40523 PHYSICAL ADDRESS: 900 CAMP BURNAMWOOD ROAD, IRVINE, KENTUCKY 40336 INFO@BURNAMWOOD.NET | WWW.BURNAMWOOD.NET

RENTAL RESERVATION FORM

A \$50 non-refundable deposit is due with the return of the reservation form, in order to confirm your event. The remainder of the balance is due within 24 hours of your event.

NAME OF EVENT	
ORGANIZATION/GROUP	
NUMBER OF ATTENDEES	
CONTACT PERSON	
EMAIL	
PHONE NUMBER	
MAILING ADDRESS	
DATES REQUESTED	
ARRIVAL TIME	DEPARTURE TIME

LODGING - MARK ALL THAT APPLY

WOODS LODGE	
DATES REQUESTED	
NUMBER OF PEOPLE	
BURNAM LODGE	
DATES REQUESTED	
NUMBER OF PEOPLE	
MOUNT LODGE	
DATES REQUESTED	
NUMBER OF PEOPLE	
UNIT LODGE	
DATES REQUESTED	
NUMBER OF PEOPLE	
CABINS	
DATES REQUESTED	
NUMBER OF CABINS	NUMBER OF PEOPLE
TENT SITES	
DATES REQUESTED	
NUMBER OF TENTS	NUMBER OF PEOPLE

MEETING ROOMS & GROUNDS - MARK ALL THAT APPLY

MAIN PAVILION & GROUNDS	
DATES REQUESTED	
NUMBER OF PEOPLE	
POOL & POOL PAVILION	
DATES REQUESTED	
NUMBER OF PEOPLE	
DINING HALL	
DATES REQUESTED	
NUMBER OF PEOPLE	
MOUNT LODGE MEETING ROOM	
DATES REQUESTED	
NUMBER OF PEOPLE	
BURNAM LODGE MEETING ROOM	
DATES REQUESTED	
NUMBER OF CABINS	NUMBER OF PEOPLE
WOODS LODGE MEETING ROOM	
DATES REQUESTED	
NUMBER OF TENTS	NUMBER OF PEOPLE

FOOD SERVICE - IF REQUESTING FROM BURNAMWOOD

BREAKFAST
DATES REQUESTED
MENU TYPE(S)
NUMBER OF PEOPLE
LUNCH
DATES REQUESTED
MENU TYPE(S)
NUMBER OF PEOPLE
DINNER
DATES REQUESTED
MENU TYPE(S)
NUMBER OF PEOPLE

SPECIAL INSTRUCTIONS (INCLUDING FOOD, TABLE SET-UP, CHAIR SET-UP, ETC.)

RESERVATION CONFIRMATION RELEASE OF LIABILITY AGREEMENT

The undersigned, acting in his/her capacit	ty as the	of
	Position of Undersigned	
	states that his/her organization/group, in it	s entirety,
Complete Group/Organization Name		
Center by their own choosing and that the limited to: hiking, climbing, riding, playing	e services offered by Burnamwood Camp and Care are certain risks and dangers including, but g, swimming, boating, running, campfires, or oass; accident or illness in remote places without d the forces of nature.	not ther
equipment, services or food provided by B associates, or contractors, and the Presbyte I, the undersigned, and the aforementione including the risk of simple negligence and administrators, and assigns Burnamwood Transylvania, its board of directors, its age	For, the right to participate in any activities and surnamwood Camp and Conference Center, its ery of Transylvania, its agents, associates, or cored organization/group do hereby assume all the d do release and discharge for my heirs, executed Camp and Conference Center, the Presbytery onts, associates, or contractors from all claims, disc of, or in connection with my and my organization.	agents, ntractors, ese risks, ors, of emands,
Complete Group/Organization Name	Printed Name of Representative	
Date	Signature of Representative	
such signature shall create a valid and binding obli	mile transmission or by e-mail delivery of a ".pdf" format gation of the party executing (or on whose behalf such s facsimile or ".pdf" signature page were an original thereo	ignature is
Complete Group/Organization Name	Typed Name of Representative	
 Date	Signature of Representative	