

SPECIAL EVENT SCHEDULING FORM

Please Use Separate Page for Each Event
Fax Completed Form to 254.897.3960

Date of Event: _____ Day of Week: Mon Tue Wed Thur Fri Sat Sun
Time Needed: _____ # of People Participating: _____

Whole Camp or Individual Church

Church Name: _____

On Site Contact Person: _____

On Site Cell Phone #: _____ On Site Cabin/Room #: _____

Food Desired:

- Ice Cream - \$1.50 per person (includes toppings or sodas)
Select Flavors: Vanilla # of gal. _____ Chocolate # of gal. _____ S'berry # of gal. _____
Includes one of the following:
 Toppings (Chocolate, Caramel, Cherries, Whipped Cream & Sprinkles) OR
 Sodas for Floats (Cola & Root Beer)

Watermelon - # wanted _____ (priced based on market value)

S'mores Supplies – 2 s'mores per person - \$.75 per person
Campfire for S'mores Requested? _____ When? _____

Soft Drinks – Select Flavors & Quantities - \$.50 per can

- | | | |
|--|---|--|
| <input type="checkbox"/> Coke # _____ | <input type="checkbox"/> Fanta Orange # _____ | <input type="checkbox"/> A&W Root Beer # _____ |
| <input type="checkbox"/> Diet Coke # _____ | <input type="checkbox"/> Dr Pepper # _____ | <input type="checkbox"/> Big Red # _____ |
| <input type="checkbox"/> Sprite # _____ | <input type="checkbox"/> Diet Dr Pepper # _____ | <input type="checkbox"/> Bottled Water # _____ |

Hot dogs/Hamburgers/Other: _____ Call Evan with details _____

Pizza: Order from Mr. Jim's: _____ Simple Simon's: _____ Specify below #, size(s), kind(s)
When? Day? _____, Time? _____ Where? _____ Contact Staff Liason w/details!

Other: _____

Special Requests / Instructions: _____

All items include paper products & serving utensils. All items will be placed in designated area of the Kitchen for your group to pick up. Please check with office or kitchen staff the day of event for final details and for location of items. Please pick up the items and return them to the kitchen.

Office Use