## **MATTOLE CAMP & RETREAT CENTER**

A mission of the Presbytery of the Redwoods

P.O. Box 675 Bayside, CA 95524 707 629-3308 email: info@mattolecamp.com

## **REGISTRATION FORM 2023**

(Please submit this form with ye	our Deposit Calculation	form & Check)	
ORGANIZATION:			
TODAY'S DATE:CON	NTACT PERSON :		
(The contact person is the first to ar <b>REGULA</b>	rive & the last to leave and is h TIONS and CHECK-IN/CHEC	-	to the <b>RULES &amp;</b>
PHONES:	OR		
E-MAIL:			
ADDRESS:	CITY:	ST:Z	IP:
ARRIVAL DATE & TIME:		# OF NIGHTS:	
ESTIMATED # OF INDIVIDUALS	S: COMPANION P	ETS? Y N (must	hold certification)
PLEASE GIVE A BRIEF DESCRII PLANNED			s
By signing this form, I agree to be the re comply to all Rules a	esponsible party for the above r and Regulations pertaining to N		
SIGNATURE:		DATE:	
THAN	K YOU! PLEASE ENJO	Y YOUR VISIT!	
WOULD YOU LIKE TO RECE	IVE OUR ANNUAL NEWS	SLETTER? (circle one	e) YES NO
HOW DID YOU HEAR ABOU	T US?		