



# BATTLESHIP IOWA

## CAMP BATTLESHIP RESERVATION REQUEST



**Instructions:** Download and save file. Complete all required fields and save as "-Group Name-Camp Battleship Request" and submit to [overnights@labattleship.com](mailto:overnights@labattleship.com).

Group Name:

Person of Contact (POC):

POC's Phone Number:

POC's Email:

Total # of Minors:

Total # of Adult Chaperones (1 for every 10 minors required):

Top Three Preferred Dates, in Order of Preference:

Will this reservation coincide with a trip to Emerald Bay:

- |    |     |
|----|-----|
| 1. | Yes |
| 2. | No  |
| 3. |     |

### **Agreement (Please Review and Initial to Indicate Agreement):**

I acknowledge and agree that all minor participants in attendance will be at least 6 years of age.

A deposit of \$250 must be received two weeks after reservation date has been confirmed.

The remaining balance of your reservation must be submitted two weeks before your reservation.

A Certificate of Insurance listing the Pacific Battleship Center as additionally insured will be provided.

A roster listing all participants and any dietary needs or food allergies will be submitted two weeks before your reservation date.

Each participant will submit the following forms from the Camp Battleship Program Guidebook:

- Release and Hold Harmless Form (minors and adults)
- Chaperone agreement (adults only)
- Image/Media Release (optional, minors and adults)

**Name - Typed**

**Signature**

**Date**

**Please reach out to [overnights@labattleship.com](mailto:overnights@labattleship.com) or call 977-446-9261 ext. 706 if you have any questions or concerns.**