

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

## CAMP HAZEN YMCA GROUP CAMPING

## PRE-RETREAT CONFIRMATION

GROUP NAME:	GROUP LEADER:
DATE OF RETREAT:	to
ARRIVAL TIME:	DEPARTURE TIME:
# of Participants/Students:	x \$ = \$
# of Chaperones:	x \$ = \$
	Deposit Paid = \$
	TOTAL (less deposit) = \$
FOOD & MEALS INFO	
# of Vegetarians:	# of Vegans:
Allergies & Special Dietary Needs:	
TRANSPORTATION INFO	
ARRIVAL BY: CAR BUS	S BOTH
AUDIO/VISUAL EQUIPMENT	
PROJECTOR & SCREEN SOU	JND SYSTEM TV & DVD PLAYER