

All Church Family Retreat, Timber Lakes Camp Aug 4-7

Early Bird Fee schedule: Prices good thru July 20, but will increase July 21

Chart prices are per person per night....

*Motel- AC,bath,linens		Bunk House- AC, bath	
6per room	\$ 22	6 to 11	\$ 19
5	\$ 26	5	\$ 22
4	\$ 28	4	\$ 24
3	\$ 33	3	\$ 28
2	\$ 42		

*Cottages- AC,bath		*Cabins - AC		*Dorm - AC	
6 to 9	\$19	5	\$18	6 to 14	\$17
5	\$22	4	\$20	5	\$18
4	\$24	3	\$23	4	\$20
3	\$28	2	\$29	3	\$23

DISCOUNT RATES for families of 4 or more (1 family per unit)

*Motel: \$65 per night

*Cottage: \$55 per night

*Cabin: \$45 per night

Tents: \$7 per person per night or \$21 per family

RV Hookups: \$20 per night (30amp electric & water with dump station)

Day stay only: \$6 per person per day or \$18 per family

We can all eat together at this camp!

*Meals must be included when staying in Motel, Cottage, Cabin, Dorm or Bunk House... Tents & RV's may provide their own meals

3 MEALS per day: Single Adult-\$24, Family Adult-\$21, Child-\$12

Ages 0-3=free, 4-11=child

Day 1 meals =Wed nite, Thurs morn, Thurs lunch

Day 2 meals =Thurs nite, Fri morn, Fri lunch

Day 3 meals =Fri nite, Sat morn, Sat lunch

. Facility charge for everyone staying overnight \$10 per person

Prices Include:

Worship Arena w sound sys, indoor Gym with equipment,
2 Lodges w/Kitchen (Kids), Pool, shower house, trails, lakes,

boats, recreation fields, Shelter houses, picnic tables, campfires

Question or exceptions see Deb at dmolder@mbtkc.org

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DISCOUNT RATES for families of 4 or more (1 family per unit)

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Question or exceptions see Deb at dmolder@mbtkc.org

Registration Form Date _____

Questions? See Deb dmolder@mbtkc.org or call 816.398.8171

Circle one: Motel Cottage Cabin Dorm Tent RV

Circle one: 3 nights 2 nights 1 night # ___Days only Other

Family or Single Requesting to room with others: Y or N

All Name(s) & Children's ages:

Email contact: _____

Phone:(home) _____ (cell) _____

Cost Amounts— See Deb or Shari for assistance

Adults:Room _____ Meals _____ Facility _____

Kids: Room _____ Meals _____ Facility _____

Discounts/scholarship: _____

Totals: _____

Notes: _____

Registration Form Date _____

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