10.15

## GOLIATH REGISTRATION FORM

ATTENTION: Download this blank contract before filling it out. Save it on your computer, fill it out in its entirety, save it once more after filling it out, and finally Email the contract as an attachment to Jaime@OakridgeMinistries.net. DO NOT fill out in your browser!

Thank you for choosing Oakridge Christian Camp & Retreat Center to host your event! Please take the time to **CAREFULLY** read through and **FULLY COMPLETE** this contract. Thank you and God bless! For more complete instructions for this contract, see the final page of this document.

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Group:								Group Lead	ler:					
Address:	HW								Cit	y/State:				
Zip Code:		Phone 1:	WH _	_c [				Phon	ne 2:	w h	_c[			
Email:					Desired	Date 1:				Desire	d Date 2	2:		
access and Hourly, Ha necessary to	TH Challenge C to reserve date. lf-Day, and Ful. o another date 1 e of Liability Fo	. Sometimes l Day packago within 30 day	individual: es. Individi es. Groups	s and ual Th can se	smaller g rills may lect from	roups are be purcha either mi	able to a used when nimal or	ccess Golia: available. Pa	гн whei ayments	n other g are fully	roups ai non-ref	re using i fundable	t, or else may j but can be tran	purchase sferred if
Goliath	Challenge Co	urse Discou	ınts.											
<b>Student Dis</b> Thursday. M	scount - Student Ainiumum group p Discount - Sav	ts, age 10 thro of 6. 1 Adult	ough Colleg per 5 Stud	ents (fo	or groups	of 6) may	receive Sti	ıdent Discour	ıt.				ol year, Monday	through
If your gro	<b>G Course Ti</b> oup has over 6 icipant the fu	60 participa	nts, you 1	will n		•							_	
	First Ses	sion	Time:		to		Cho	ose One:	Ом	orning	OAfi	ternoon	<ul><li>Evening</li></ul>	
	Second S	Session	Time:		to		Cho	ose One:	Ом	orning	OAfi	ternoon	<ul><li>Evening</li></ul>	
	Third Se.	ssion	Time:		to		Cho	ose One:	Ом	orning	OAf	ternoon	<ul><li>Evening</li></ul>	
Goliath <i>Note: 60</i> Exclusi	ive Access A experience Display participant VE HALF-DA OLIATH for 3	e by selecti s max can Ay Access.	ng from	the Cou	options arse at o	s below ne time	this sec	ction.			se, you \$1,50	·	ustomize yo	our
Number	of Session	s (for gre	oups ov	ER 60	o):		_× \$1	500 =	Exci	USIVE	ACCE	ss Sub	TOTAL:	
HALF-DAY	PACKAGE. Ha	ve a large gro \$35 per p	oup? You'l erson =	ll get a =	better d	eal with	the Exclu Half-Day	sive Rate!  Subtotal	y Subto	tal (Stud				
EOB HOI	J <b>RLY THRILI</b>	S SELECT V	Olib Deen	RED T	нрите 4	Choose +1	10 numha	r of hours w					Thrill I = Low	
		Level Thrills						,		-				1111111
1st Zi	p Line-H(A)							ine-H (B)		•	•	ving-H (		
	er Pole-H (A)		_				_	Wall 32'-L	(C)			_		
_	Net-L (B)		_				ncline Lo					_		
Team Wall-L (D - 10-40 people)						Hour on the Tower-H (D - 6 people)								

Hourly Thrills.	. Most Thrill	s allow appro	ximately 6-10	participants	per hour.			
A-Level	Thrill hour	s × \$150	per hour per	Thrill =	Thrill Subtotal			
B-Level	Thrill hours	s × \$125	per hour per	Thrill =	Thrill Subtotal			
C-Level	Thrill hour	s × \$100	per hour per '	Thrill =	Thrill Subtotal			
D-Level	l (Group) Th	ırill hours	× \$150 per h	nour per Thr	ill = Thrill \$	Subtotal		
	-		-	-		OURLY THRILLS SUBTO	OTAL:	
					eady reserved a particular Th ore people would like to ride	rill and would like to p	ourchase an "add-on;	" for
participa	ants ×	Add-On A	A-Level Thrills	× \$15 =	Individual T	Thrills Subtotal		
participa	ants ×	Add-On B	B-Level Thrills	× \$12 =	Individual	Thrills Subtotal		
participa	ants ×	Add-On (	C-Level Thrills	× \$10 =	Individual	Thrills Subtotal		
					In	dividual Thrills Su	BTOTAL:	
Shirts. Can be p	urchased in a	advance to be	enefit from disc	ounts. Also a	vailable on-site.			
Shirts - \$12 S Tot	tal:	M Total:	L Total:	XL Total: _	XXL (\$15) Total:	XXXL (\$15) Total:	Shirt Subtotal:	
						Shirts	SUBTOTAL:	
LARGE GROUP DI	scount. Do	es not apply t	to Exclusive Ac	cess, as it is a	lready heavily discounted.			
Deduct 2% for ev	ery 10 parti	cipants on th	ie same Full or	Half-Day.			Less:	%
Goliath Challeng	re Course To	otal (	) minus	Large Grou	p Discount () =	= Goliath Discoun	ted Total:	
forfeiting your payme you commit to the sar and the Oakridge Min YOUR BILLING AG	ent if you don't. me original mir nistries cancella	. Please rememb nimum number ation policy. Tha Please make sure	per, however, that y as on this contract ank you.	you are free to out of the control o	not sign the contract unless you ar change your event, if necessary, to a juires your signature on this contract very carefully and that you fully un	a date within 30 days, to rect to confirm awareness of	etain your payment (as lo both the terms of this cor	ng as itract
FIRMED until we rece	eive your payme	ent. For further a	assistance, please o	contact the Oak	ridge office.	2 1		
					<b>E</b> of the day of your event. tial individual cancellations) who d	o not attend your event. W	e recommend that you re	ceive
Participants who do r	S: You are free not register in a	to bring additio dvance cannot r	onal guests over yo receive the advance	e group discour	nal number, provided that space is its. with you to your event to cover any			
should be paid before	•	1 . 1 . 1	21.41	1 1	• "		-	
					er is #			
			you to in the m credit card:					
		xpiration date				Piscover America	an Express	
		•			my information from over the	_	ин Ехргезз	
			cash / money ord		,	P. Torrer		
			·		AFTER the event within 30 day	ys. (No discounts apply.)		
provided to you in the	eir entirety and kridge <i>NO LAT</i>	agree to have your TER THAN 7 DA	our group abide by AYS IN ADVANCI	y them while at E <b>OF YOUR E</b> V	ce Oakridge receives your payment Oakridge; and {3} any adjustment ENT. Please be as accurate as possi	to the group number size	stated on this contract wi	ll be
								_

Group Leader Name (printed)

If using our interactive PDF, Oakridge Ministries will accept the above typed name as a valid digital signature. By signing, you are indicating that you understand that cancellation will definitely result in forfeiture of your event payment.

Group: Group Leader:  Address: H W City/State:  Zip Code: Phone 1: W H C Phone 2: W H C  Email: Desired Date 1: Desired Date 2:  First Session Time: to Choose One: Morning Afternoon Evening  Second Session Time: to Choose One: Morning Afternoon Evening  Third Session Time: to Choose One: Morning Afternoon Evening  Third Session Time: to Choose One: Morning Afternoon Evening  ATTENTION GOLIATH TECH: If Group Leader has any further questions regarding the following, refer the to the Oakridge Office:  Financial and Cancellation Agreement  Billing Agreement  Final Payment (in full)  No-Shows  Group Overages  Add-on Payments  PAYMENT HISTORY  FIRST PAYMENT PAID BY AMOUNT: \$  TOTAL PAID: \$  TOTAL PAID: \$  TOTAL PAID: \$  Group Leader Name (printed)  Date Group Leader Name (signature)  Purchase Details  Surres. Can be purchased in advance to benefit from discounts. Also available on-site.  Shirts- 512 Stotal: Midd: Listel: Midd: NAMA (115) total: NAMA (115) to	Goliath Event Fo	ORM - FOR	Oakridge	Office Usi	E ONLY O	N DAY OF EVENT - 3 of		
Desired Date 1: W _ H _ C	Group:		Group Lea	Leader:				
Email:    Desired Date 1:	Address:HW				City/State:			
First Session Time: to Choose One: Morning Afternoon Evening Second Session Time: to Choose One: Morning Afternoon Evening Third Session Time: to Choose One: Morning Afternoon Evening Third Session Time: to Choose One: Morning Afternoon Evening  ATTENTION GOLIATH TECH: If Group Leader has any further questions regarding the following, refer the to the Oakridge Office:  Financial and Cancellation Agreement Billing Agreement Final Payment (in full) No-Shows Group Overages Add-on Payments  PAYMENT HISTORY  FIRST PAYMENT PAID BY AMOUNT: \$  TOTAL PAID: \$  By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed)  Date Group Leader Name (signature)  Purchase Details  SHIRTS. Can be purchased in advance to benefit from discounts. Also available on-site.	Zip Code: Phone 1:	WHC	Pho	Phone 2: W H C				
Second Session Time: to Choose One: Morning Afternoon Evening Third Session Time: to Choose One: Morning Afternoon Evening Third Session Time: to Choose One: Morning Afternoon Evening  ATTENTION GOLIATH TECH: If Group Leader has any further questions regarding the following, refer the to the Oakridge Office:  Financial and Cancellation Agreement Billing Agreement Final Payment (in full) No-Shows Group Overages Add-on Payments  PAYMENT HISTORY  FIRST PAYMENT PAID BY AMOUNT: \$  TOTAL PAID: \$  TOTAL PAID: \$  By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed)  Date Group Leader Name (signature)  Purchase Details  SHIRTS. Can be purchased in advance to benefit from discounts. Also available on-site.	Email:		Desired Date 1:		Desire	ed Date 2:		
Third Session  Time:	First Session	Time:	to	Choose One:	<ul><li>Morning</li></ul>	○ Afternoon ○ Evening		
ATTENTION GOLIATH TECH: If Group Leader has any further questions regarding the following, refer the to the Oakridge Office:  Financial and Cancellation Agreement Billing Agreement Final Payment (in full) No-Shows Group Overages Add-on Payments  PAYMENT HISTORY  FIRST PAYMENT PAID BY  AMOUNT: \$  TOTAL PAID: \$  By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed)  Date  Group Leader Name (signature)  Purchase Details  Suiris. Can be purchased in advance to benefit from discounts. Also available on-site.	Second Session	Time:	to	Choose One:				
Financial and Cancellation Agreement Billing Agreement Final Payment (in full) No-Shows Group Overages Add-on Payments  PAYMENT HISTORY  FIRST PAYMENT PAID BY AMOUNT: \$  SECOND PAYMENT PAID BY AMOUNT: \$  By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed) Date Group Leader Name (signature)  Purchase Details  Shirts. Can be purchased in advance to benefit from discounts. Also available on-site.	Third Session	Time:	to	Choose One:				
PAYMENT HISTORY  FIRST PAYMENT PAID BY AMOUNT: \$  SECOND PAYMENT PAID BY AMOUNT: \$  TOTAL PAID: \$  By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed) Date Group Leader Name (signature)  Purchase Details  SHIRTS. Can be purchased in advance to benefit from discounts. Also available on-site.		Fina Billin Fina No-S Gro	ncial and Can ng Agreement I Payment (in Shows up Overages	cellation Agree n full)		arding the following, refer then		
By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed)  Date  Group Leader Name (signature)  Purchase Details  Shirts. Can be purchased in advance to benefit from discounts. Also available on-site.					Amount: S	\$		
By signing below you are indicating that your GOLIATH experience was handled in a safe, professional, and proper manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed)  Date  Group Leader Name (signature)  Purchase Details  Shirts. Can be purchased in advance to benefit from discounts. Also available on-site.	Second Payment paid b	Υ			Amount: S	\$		
manner and that Oakridge fulfilled its terms of the contracted experience. Thank you!  Group Leader Name (printed)  Date  Group Leader Name (signature)  Purchase Details  Shirts. Can be purchased in advance to benefit from discounts. Also available on-site.					TOTAL PAI	D: \$		
Purchase Details  SHIRTS. Can be purchased in advance to benefit from discounts. Also available on-site.	, , ,	,		*		e, professional, and proper		
SHIRTS. Can be purchased in advance to benefit from discounts. Also available on-site.	Group Leader Name (printed)		Date	2	Group Leader	Name (signature)		
	•							

## Goliath Event Form - for Oakridge Office Use Only on Day of Event - $4\ { m of}\ 4$

**EXCLUSIVE HALF-DAY ACCESS.** 

Access Goliath for 3 hours; all staff provided for 60 partic	ipants MAX per session. \$1,500
Number of Sessions (for groups over 60):	× \$1,500 = Exclusive Access Subtotal:
Custom Experiences are generally ideal for groups of	fewer than 40 participants.
Half-Day Package. Have a large group? You'll get a better deal with the	ne Exclusive Rate!
participants × \$35 per person = H	Half-Day Subtotal
participants × \$28 per person = I	Discounted Half-Day Subtotal (Student Discount)
	HALF-DAY PACKAGE SUBTOTAL:
$\textbf{FOR HOURLY THRILLS: Select your desired Thrills.} \ \textit{Choose th}$	e number of hours you want for each Thrill. H = High Thrill, L = Low Thrill
A-Level Thrills: \$150; B-Level Thrills: \$125; C-	Level Thrills: \$100; D-Level (Group) Thrills: \$150
1st Zip Line-H (A) 2nd Zip Line-H (B) 3i	rd Zip Line-H (B) Haul Swing-H (A)
Pamper Pole-H (A) Climbing Wall 22'-L (C) C	limbing Wall 32'-L (C) Climbing Wall 42'-L (C)
Cargo Net-L (B) Cargo Tube-L (B) Ir	acline Log-L (B)
Team Wall-L (D - 10-40 people)	our on the Tower-H (D - 6 people)
<b>HOURLY THRILLS.</b> Most Thrills allow approximately 6-10 participants p	er hour.
A-Level Thrill hours × \$150 per hour per Thrill =	Thrill Subtotal
B-Level Thrill hours × \$125 per hour per Thrill =	Thrill Subtotal
C-Level Thrill hours × \$100 per hour per Thrill =	Thrill Subtotal
D-Level (Group) Thrill hours × \$150 per hour per Thril	l = Thrill Subtotal
	Hourly Thrills Subtotal:
Individual Thrills. These can only be selected when a group has alread example, if the Haul Swing (A-Level Thrill) is already open and four modern and the selected when a group has alread example.	dy reserved a particular Thrill and would like to purchase an "add-on;" fo
participants × Add-On A-Level Thrills × \$15 =	Individual Thrills Subtotal
participants × Add-On B-Level Thrills × \$12 =	
participants × Add-On C-Level Thrills × \$10 =	Individual Thrills Subtotal
	Individual Thrills Subtotal:
<b>SHIRTS.</b> Can be purchased in advance to benefit from discounts. Also av	ailable on-site.
Shirts - \$12 S Total: M Total: L Total: XL Total:	XXL (\$15) Total: XXXL (\$15) Total: Shirt Subtotal:
	Shirts Subtotal:
Large Group Discount. Does not apply to Exclusive Access, as it is also	ready heavily discounted.
Deduct 2% for every 10 participants on the same Full or Half-Day.	Less:
Goliath Challenge Course Total () minus Large Group	Discount () = Goliath Discounted Total:
Notes and Additional Information:	