

Camp GuilRock
United Methodist Camp
RESERVATION FORM

531 Beville Road
Reidsville, NC 27320
(336) 342-1951

Date: _____

Church/Organization: _____

Contact Person: _____

Phone (O): _____ (R): _____ (F): _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Arrival: _____ Time: _____ Date of Departure: _____ Time: _____

Total Number Expected in Group: _____

Facilities:

_____ Wesley Pavilion: Number of Days: _____
_____ Lakeside Pavilion: Number of Days: _____
_____ Swimming Pool: Number of Hours: _____ Days: _____
_____ Lodge: Number of Days: _____
_____ Canoeing: Number of Hours _____
_____ Hayride
_____ Tent Camping: Number of persons: _____

Facility and Recreation charges:

_____ x _____ = _____
_____ x _____ = _____
_____ x _____ = _____
_____ x _____ = _____

Total Cost: _____
Less reservation Deposit: _____
Total Amount Due: _____
Amount Paid: _____
Additional Amount Due: _____