CAMP CLARK WILLIAMSON 390 MASON ROAD, HUMBOLDT, TN 38343

Rental Contract. Detach & mail with your deposit.



Name of Renting A	Agency			
Address				
Rental Period from dat	e Hour	•	_ to date	Hour
Rental Rate	per person.	Other cha	rges?	<u> </u>
I agree to represent the Ren in assuming	ting Agency of this Reg g liability for the follo	esident Camp wing:	o (), Retreat (), C	Conference (), Day Camp ()
	damaged property of tems which are found inistrator the day of a	at the time o	ring or following y f check-in. (These	your groups stay with the items shall be given in
2) The cost of replacing any or broken following		or other equ	ipment found to be	missing from the premises
3) The cost of restoring the	building(s) and groun	ds to proper	cleanliness and or	der.
4) The payment of rental ch	arges before departin	g camp.		
5) Provide the Camp Admin This must include n	istrator a list of all pe ame, address, and ph			camp or their applications.
I further agree to cooperate and executing the necessary Department of Public Healt	measures to comply v	inistrator in i	maintaining good h regulations requi	nealth and safety standards, red by the State of Tennessee
I understand that an inspect determine the general condi made or other arrangement	tion of the premises. I	facilities will I agree to ren	be made after each	camping session to ntil final inspection can be
I further understand that ca coordination with the Camp			discretion of the in	dividual Group Leader, after
Lastly, I have read, agree an	nd will adhere to and	follow Camp	Clark Williamson	's guidelines and policies.
Agency Representative				Date
Agency				
	CCWContract Deposit	Office Use Pro-	Only: of of Insurance als/Cabins	