

**~ Reservation/Waiting List Request Form ~**

Request for (year? \_\_\_\_\_)  
Is this for one year only? Yes No  
Is this to be on-going? Yes No  
Event Type:  
 Family Reunion  
 Housekeeping Cabin  
 Summer Group  
 Winter Retreat  
 Other: \_\_\_\_\_

<p align="center"><i>~ For Office Use Only ~</i> Today's Date _____</p> <p>Staff Initials _____</p> <p>How Contacted? _____ <i>{ie: by phone, a written request, or in person}</i></p> <p>Has this been written in the book? Yes – No</p> <p><i>Date Contract Sent:</i> _____</p> <p><i>Date Returned</i> _____</p> <p><i>Deposit Paid \$</i> _____</p>
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Group Name: \_\_\_\_\_ Approx Number in Group: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_  
*Best time to call at home? \_\_\_\_\_ OK to call at work? Yes – No*

Contact Person's Email: \_\_\_\_\_

Contact Person's  
Congregation Name/City St: \_\_\_\_\_  
*Missouri Synod Congregation? Yes – No Iowa District West? Yes – No*

Contact Person's  
Pastor's Name: \_\_\_\_\_

Facility:	1 <sup>st</sup> Choice: _____	Dates:	1 <sup>st</sup> Choice: _____
	2 <sup>nd</sup> Choice: _____		2 <sup>nd</sup> Choice: _____
	3 <sup>rd</sup> Choice: _____		3 <sup>rd</sup> Choice: _____

Special Needs *{ie: crib or high chair; picnic table; grill}*: \_\_\_\_\_  
\_\_\_\_\_

Does this group plan on Camp prepared meals? Yes – No – some : \_\_\_\_\_  
\_\_\_\_\_

Additional Comments: \_\_\_\_\_

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