

Camp Lindisfarne Trust
Payment Form

Please return this form along with your payment for the use of Lindisfarne Camp

To: Camp Lindisfarne Trust, c/o Liz McKerchar, "Shrimpton's Hill", R.D 14, CAVE, 7984, South Canterbury.

Or Bank Transfer to Camp Lindisfarne Trust 03 0887 0434829 00 (include name and booking dates in the refernece areas) If paying by Bank Transfer, this completed form can be emailed to shrimptons@farmside.co.nz

Name of Applicant and/or Group using Camp:

Date/s Camp used: ___ / ___ / ___ to ___ / ___ / ___

Total Days: _____

Number of Campers _____

Number of Nights _____

Fees Calculation:

CATEGORY	FEE RATE	NUMBER x DAYS x FEES	TOTAL FEES DUE
SCHOOL GROUPS	CHILDREN - \$6.00 ADULT -\$10.00		
ALL OTHER GROUPS			
Weekend	CHILDREN -\$10 ADULTS-\$20		
Weeknights	CHILDREN-\$10 ADULTS-\$15		
DAY USE (no overnight)	FULL DAY-\$150 PART DAY-\$50		
FUNCTIONS	\$750.00		
Weddings, Birthdays etc			

Did you leave your rubbish at the Camp? Yes/No -----
 (If yes then include \$100 for collection)

Payable to "Camp Lindisfarne Trust" Total Payment \$ _____

Please do not subtract the deposit from the fees payable. The deposit will be refunded by cheque less breakages and toll calls and assuming that the Camp is left in a suitable state for immediate re-use.