

# CAMP QUARRYLEDGE

BUSINESS OFFICE  
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Community of Christ

CAMP QUARRYLEDGE  
1626 State Rt. 31  
Oswego, Illinois 60543  
(630) 554-8324

## OVERNIGHT CAMPGROUND USE REPORT

Report to be completed at the close of Activity.  
Attach to Checkout form

Name of Activity \_\_\_\_\_ Date(s) of Activity \_\_\_\_\_

Director:

Business Manager:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

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

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

Number of People Registered (attending) your event \_\_\_\_\_

GROUND FEES (\$22.00 per person, per day - Children 2yrs. and under free)

### *Location*

Lodge overnight \_\_\_\_\_ x \_\_\_\_\_ x \$22.00 = \$ \_\_\_\_\_

Tents Overnight \_\_\_\_\_ x \_\_\_\_\_ x \$11.00 = \$ \_\_\_\_\_

Trailers overnight \_\_\_\_\_ x \_\_\_\_\_ x \$11.00 = \$ \_\_\_\_\_

Trailers w/AC additional fee \_\_\_\_\_ x \_\_\_\_\_ x \$11.00 = \$ \_\_\_\_\_

Daily Visitors \_\_\_\_\_ x \_\_\_\_\_ x \$11.00 = \$ \_\_\_\_\_

Total Ground Fees \$ \_\_\_\_\_

### How Much Do You Owe To CAMP QUARRYLEDGE?

Add together: Total Ground Fees \$ \_\_\_\_\_

Less Deposit Paid \$ \_\_\_\_\_

Total Owed to Camp Quarryledge\*\* \$ \_\_\_\_\_

\*\* Make checks payable to Community of Christ