

Group Hold Information Form

F.Y.R.E. 2022

ORGANIZATION INFORMATION (items in bold are required)

Church Name _____

Church Address 1 _____

Church Address 2 _____

Church City/St/Zip _____

CONTACT INFORMATION

Name _____

Street _____

City / St / Zip _____

Home Phone _____ **Cell Phone** _____

Email _____

GROUP HOLD INFORMATION (Provide the following information to reserve spaces for your group)

Number of Spots to Reserve _____

How many of the following do you expect to register?

Adults _____ **Males** _____ **Females** _____

Youth _____ **Males** _____ **Females** _____

Has the Church been to Twin Pines Camp before? Y or N

How will you make the Spot Reservation down payment? _____ **Check enclosed** _____ **Credit Card**

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Credit Card Information

Card Type: VISA MasterCard Discover (no AmEx) **Charge Amount:** _____

Account Number: _____ **Name on Card:** _____

Cardholder Address: _____

Expiration Date: _____ **Security Number:** _____

Cardholder Signature: _____

Office Use:

_____ Credit Card Charged _____ Amount of Check _____ Data Entered

_____ Group Hold Created _____ Leader Notified of Code Code Provided _____