



# Camp Little Light

## Facility & Event Reservations

Please complete this form and submit it along with your group's schedule.

Today's Date : \_\_\_\_\_

Your Organization : \_\_\_\_\_

Organization's Address: \_\_\_\_\_

Contact's Name: \_\_\_\_\_

Contact's Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Organization's Website: \_\_\_\_\_

Check all that apply. I wish to reserve:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> The Chuckwagon | <input type="checkbox"/> The Freedom Barn   | <input type="checkbox"/> The Bunk House |
| <input type="checkbox"/> The Pool       | <input type="checkbox"/> The Praise Barn    | <input type="checkbox"/> Cabin One      |
| <input type="checkbox"/> Cabin Two      | <input type="checkbox"/> The Zip Line/Slide | <input type="checkbox"/> The Big House  |
| <input type="checkbox"/> Hiking Trails  | <input type="checkbox"/> Game Room          | <input type="checkbox"/> Porch Grill    |

Your Event Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How many Participants will be in your group? \_\_\_\_\_

How many Leaders/Chaperones? \_\_\_\_\_

Circle the days of the week do you wish to reserve Camp Little Light Facilities:

Sun      Mon      Tues      Wed      Thurs      Fri      Sat

Circle how frequently you wish to reserve Camp Little Light facilities?

Weekly      Bi-Weekly      One Time Event

**Requested reservation date(s):** \_\_\_\_\_

**Requested time on that/those date(s):**

From \_\_\_\_\_ (AM) or (PM)

To \_\_\_\_\_ (AM) or (PM)

**Will this event require Camp Little Light staff assistance?** \_\_\_\_\_ YES \_\_\_\_\_ NO

**If yes, please explain:** \_\_\_\_\_

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**Will this event require the use of the Camp's sound or media technology?**

\_\_\_\_\_ YES (we will contact you for more details)

\_\_\_\_\_ NO

**Will this event require meals cooked by our camp kitchen staff?**

\_\_\_\_\_ YES (we will contact you for more details)

\_\_\_\_\_ NO

**Rental items required: (check all that apply with quantity)**

\_\_\_\_\_ Chairs \_\_\_\_\_ Picnic tables \_\_\_\_\_ Coolers

\_\_\_\_\_ Tables \_\_\_\_\_ Recreation/game equipment (specify your needs)

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**Submit via email to [camplittlelight@gmail.com](mailto:camplittlelight@gmail.com) or by US Mail to:**

Camp Little Light

Attention: Facility Reservation Request

227 Little Light Drive

Royston, GA 30662

**Questions?** Contact Jerome Stratton, Camp Owner & Founder, 762-721-8944