

Community of Christ

Eastern Great Lakes Mission Center
Temple Grove Campground

CENTRAL LODGE Application Form

Applications accepted until March 31

Return application to: EGLMC, 9017 Chillicothe Rd, Kirtland, OH 44094

Date of Application _____ Date Received _____

Contact Name _____ # in party _____

Address _____ Age _____

Email _____ Phone _____

Names of those rooming with you: _____

Would you be willing to share your room? Y N _____

Number of days in the room? Sa Su M Tu W Th F Sa

Policy Statement :

Please understand that the Central Lodge space is limited. Housing will be assigned according to needs due to disability, health, and/or age. Please explain your needs below. Final assignments will be made by a small committee set up for this purpose.

Reason for needing Central Lodge: _____

After you receive confirmation a \$40.00 per person registration fee will need to be received postmarked within 7 days.

For Reunion staff only

Request Granted for ___ Central Lodge ___ Room Number Days staying Sa Su M Tu W Th F Sa

Deposit Paid _____

Waitng list information : _____

Other Information _____