

**Volunteer Program  
RV Park Application  
Pine Lake Retreat Center**

Name:			
Spouse:			
Address:		City:	State: Zip:
Phone:	Home ( )	Cell ( )	Fax ( ) E-Mail:
Planned Length of Stay:		Approximate Arrival Date:	Approximate Departure Date:
Indicate RV Type:		Motor Home	Travel Trailer
		Length _____ ft.	30 amps____ 50 amps____
Rental Site Preference:		1 <sup>st</sup> choice	2 <sup>nd</sup> choice 3 <sup>rd</sup> Choice
<p>Monthly site rental is \$50 per month while participating in volunteer program.          Volunteer program consists of husband /wife or both contributing a minimum of 3 days per week .</p>			
Husband's Experience & Skills (if volunteering):		Wife's Experience & Skills (if volunteering):	
_____		_____	
_____		_____	
Special notes:			
<p><b>Terms &amp; Conditions:</b> Pine Lake Retreat is a Christian retreat center, which is owned and operated by the Seventh-day Adventist Church. In order for all of our guests to feel comfortable at our facility, we ask that you observe a few simple guidelines while visiting.          From sundown Friday until sundown on Saturday, we make every effort to maintain a quiet atmosphere which is conducive to worship because this is the Sabbath.  <b>Pets</b> allowed if they are leashed and properly policed at all times.</p>			
<p><b>Do Not Assume Confirmation.</b> Because of the demand for the camp facilities, your reservation is not confirmed until you receive a signed copy of this application along with the receipt for your deposit.          I have read the above guidelines and agree to abide by them while at Pine Lake Retreat Center. It is also understood that there may be additional charges involved when using the facilities at Pine Lake Retreat Center and it is agreed that these charges will be paid.</p>			
Signed : _____		Date: _____	
<p>In order to hold an RV site for you, a deposit of \$50.00 is required. Deposits are non-refundable after 30 days of the approved date.</p>			
<i>(Office use only)</i>			
Camp Director's approval: _____		Date signed: _____	
Date approved for stay: _____		Deposit: _____ Receipt: _____	

**Reservations are required for camp use. Please send application to:**  
 Pine Lake Retreat – 21725 CR 33 - Groveland, FL 34736  
 Phone: 352-429-4454 Fax: 352-429-4484 Email: [denisec@pinelakeretreat.com](mailto:denisec@pinelakeretreat.com)  
[www.pinelakeretreat.com](http://www.pinelakeretreat.com)