

# CAMP SKY MEADOWS RESERVATION APPLICATION

Name of Group: \_\_\_\_\_

Church or Sponsoring Organization: \_\_\_\_\_

Group Leader (attending camp): \_\_\_\_\_

Address: \_\_\_\_\_

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

Dates Requested: \_\_\_\_\_ through: \_\_\_\_\_

Accommodations Required: (please check)

Case Lodge/Whispering Pines/Cabins: \_\_\_\_\_ Manzanita Lodge: \_\_\_\_\_

Number of cabins needed: \_\_\_\_\_ (4 max.)

Whispering Pines capacity: 36 Cabin capacity: 16 each Manzanita Lodge capacity: 26

Dates Requested for use of Pool: \_\_\_\_\_

Estimated number of campers:

Children (0-5yrs) \_\_\_\_\_ Children (6yrs +) \_\_\_\_\_ Adults \_\_\_\_\_

Estimated time of arrival: \_\_\_\_\_ Estimated departure: \_\_\_\_\_

\*\*We request that check-in be no earlier than 4pm and check out be no later than 12 noon.\*\*

Make all checks payable to First United Methodist Church of Pasadena.

SEND ALL PAPERWORK & DEPOSIT CHECK TO:

FUMC Pasadena  
c/o Maggie Audley  
500 E. Colorado Blvd.  
Pasadena, CA 91101