

APPLICATION FOR FACILITY USE

Treehaven • W2540 Pickerel Creek Road • Tomahawk WI 54487
Phone: 715.453.4106 or 715.345.6315 • Fax 715.453.1811
E-mail: treehaven@uwsp.edu Web: www.uwsp.edu/cnr/treehaven



**In order for us to hold your date(s) you must return this application with the proper deposit by _____.
After this date we cannot guarantee that the date(s) will still be available.**

Name of Organization _____
Address _____
City, State, Zip _____
Contact Person _____ Phone _____
Fax _____ E-mail _____ Tax Exempt # _____

Date(s) you would like to reserve:

Arrival Date: _____ Departure Date: _____

Arrival time _____ Departure time _____

Approximate number in group _____

Facilities Requested (all facilities are winterized):

Overnight - sleeping areas: (see separate page for rates)

- Okray Living Center A [max. 54]
- Living Center B [max. 54]
- Fern Young Cottage [max. 10/2 per room – 3 rooms with single beds; 2 rooms with queen beds]
- White Pine Lodge [max. 7 – Stahmer Unit 4 single beds; Vallier Unit 3 single beds]

Day Use - Vallier Classroom Center Meeting Rooms:

- 200 undivided A/B (carpeted) 200 A 200 B
- 201/203 undivided 201 203
- 205
- Library
- 105/107 undivided 105 107
- 109 [computer lab]
- Sylvester Auditorium

Services:

- Naturalist: *Check if interested and the program director will contact you with set-up information.*
- Recreation: *Call for availability (related to program/naturalists running program)*
- Audio/Visual Equipment
 - LCD Projector Laptop VCR Player DVD Player
 - Flip Chart White Board Slide Projector Overhead Projector/Elmo

Food Service: *Please check if interested, detailed forms will be sent closer to event for meal options and times.*

- | | | |
|---|---|--|
| <input type="checkbox"/> Breakfast | <input type="checkbox"/> Lunch | <input type="checkbox"/> Dinner |
| <input type="checkbox"/> Cash Bar | <input type="checkbox"/> Rolls/cookies | <input type="checkbox"/> Canned Soda/Bottled Water |
| <input type="checkbox"/> Cheese/Cracker | <input type="checkbox"/> Cheese/Sausage | <input type="checkbox"/> Fruit/Bread |

Special Requirements: (program services, equipment, extra food service, etc.)

Hold Harmless and Indemnity Agreement:

The undersigned does hereby agree to hold harmless and indemnify the State of Wisconsin, the Board of Regents of the University of Wisconsin System, the University of Wisconsin-Stevens Point, and Treehaven, their officers, agents and employees from any and all liability, loss, damages, costs or expenses which are sustained, incurred, or required arising out of the actions of the undersigned in the course of the visit(s) or rental of the facilities at Treehaven.

Signature of Authorized Representative

Date

Deposit:

Deposits must be received to secure the requested date noted on the front of this form. Upon receipt of the deposit a confirmation will be sent. Detailed forms will be sent about one month prior to your arrival date for completion. Cancellations more than 60 days prior to your scheduled date will result in a administration charge (1/2 your deposit). Cancellations made less than 60 days prior to the schedule date are non-refundable.

Day Use: \$100.00

Overnight use: \$250.00

Note: All groups are held responsible for any damage(s) done to our facilities. You will be charged the cost of the materials plus staff time to repair the damage(s). If damage(s) occur, the cost will be deducted from your initial deposit. If the damage(s) would exceed your deposit, you will forfeit your deposit plus the additional cost will be added to your bill.

Any invoice not paid within 30 days are subject to a finance charge.

I have read and agree to the above Deposit section.

Signature of Authorized Representative

Date

Enclosed is a check. (Make check payable to Treehaven).

Please charge my Visa or MasterCard.

Card Number: _____ Expiration Date: _____

Name of cardholder: _____

Signature: _____