

NERINGA RESERVATION FORM

NERINGA RENTAL RATES: \$400 Per Night for the first 18 People.
After that, it is \$26 per night for Adults, \$15 Per night per Child (6-17yrs), Free under 6 years old

NAME OF GROUP: _____

*Neringa is available for use to groups with religious, cultural or educational programs. Review our [Mission & Vision here](#) or at neringa.org to learn more. Additionally, Please **include a copy of your program agenda** with this form.*

TYPE OF GROUP: _____

NUMBER OF PEOPLE IN GROUP & AGE RANGE: _____

DATE & TIME of ARRIVAL: _____

DATE & TIME of DEPARTURE: _____

GROUP LIABILITY INSURANCE POLICY: _____

A Certificate of Insurance with Camp Neringa, Inc. named as additional insured is required.

CONTACT PERSON FOR GROUP: _____

ADDRESS: _____

PHONE: _____ ALT: _____

E-MAIL: _____

SIGNATURE: _____ DATE: _____

***This application will be forwarded to Camp Neringa, Inc. for approval of the use of the facilities.
For more information send an email to info@neringa.org or call 978-582-5592.***

(Camp Neringa, Inc. use only) Request Approved by Camp Neringa, Inc. :

Signature: _____ **Date:** _____