



**LUTHERAN  
OUTDOOR  
MINISTRIES  
OF  
INDIANA-  
KENTUCKY**

Website: [www.lomik.org](http://www.lomik.org)  
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Rev. Mark Radloff, Director  
Phone: 317.253.4660



**LAKE LUTHER**

5215 N 450 W  
Angola IN 46703-8413

Phone: 260.833-2383  
Contact: Rev. Mark Radloff

**APPLICATION FOR USE OF LAKE LUTHER**

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

Congregation \_\_\_\_\_

City/Town \_\_\_\_\_

Program Planned \_\_\_\_\_

Dates: From \_\_\_\_\_, time \_\_\_\_\_ To \_\_\_\_\_, time \_\_\_\_\_  
M/DD/YY ETA M/DD/YY ETD

Group Total (est.) \_\_\_\_\_ (Adults\_\_\_\_ Youth\_\_\_\_ Children\_\_\_\_)

**LODGING**

Check which accommodations you desire to reserve

\_\_\_\_\_ Cabins (Heated ~ Not available June-August)

\_\_\_\_\_ Tent/RV sites

\_\_\_\_\_ VCR \_\_\_\_\_ Time(s)

**MEETING & MEAL ARRANGEMENTS**

Hagen Center Kitchen Usage (to prepare your own meals and snacks)

Meal Service (call 260.833.2383 with exact count 2 weeks prior to event)

Breakfast Day(s)/Time \_\_\_\_\_

Lunch Day(s)/Time \_\_\_\_\_

Supper Day(s)/Time \_\_\_\_\_

Snack Day(s)/Time \_\_\_\_\_

Coffee/Tea Day(s)/Time \_\_\_\_\_

One Day Meeting at the Hagen Center

Group picnic/hiking/fishing

Waterfront usage (May-Sep)

# DEPOSIT PROCEDURES

1. A confirmed reservation will require a \$100 deposit returned to Lake Luther (5215 N 450 W, Angola IN 46703) with completed Application for Use form.
2. Cancellation of less than 6 (six) weeks notice will result in forfeiture of the deposit. Cancellation notice should be given to Lake Luther via phone (260.833-2383).
3. Requests for food service should be made at time of reservation with a confirmed people count no less than 2 (two) weeks in advance. The minimum food service charge will be based on that count. The minimum charge for any one meal is \$80.00.
4. Requests for waterfront usage require a completed Waterfront Policy form.
5. Your deposit will be credited to the total amount due for the event unless there are damage charges. If there has been damage, your deposit will be held to cover the repair cost with any additional expense billed to your group. Any credit will be refunded.
6. The balance due on any event is payable to the Resident Manager BEFORE YOU LEAVE CAMP.

FEEES ARE SUBJECT TO CHANGE WITHIN SIX MONTHS OF THE EVENT

## AGREEMENT

### WE AGREE TO:

1. Check in upon arrival - and to pay balance due at checkout.
2. Report any property damage to the Resident Manager immediately. We understand that our deposit will be held to cover the repair/replacement cost. Any additional expense will be billed to us.
3. Furnish the following: 1) one adult leader (21 years or older) for each six (6) boys or girls in attendance AND HAVE AN ADULT SLEEPING IN EACH AREA of boys/girls; 2) an adult certified in First Aid/CPR to be on duty for emergency care; 3) a certified lifeguard to manage your group's pool and waterfront activities; and 4) emergency transportation to medical care facility, if needed.
4. Do our very best to leave camp better than we found it.
5. Have following information on each group member: name, address, phone number, emergency contact names and phone numbers, listing of any known allergies or health conditions or restrictions, insurance information, and (for minors) signed permission to seek emergency medical treatment.

WE FURTHER AGREE to accept full responsibility for providing the leadership and for carrying out the program herein outlined. Our group members agree to abide by the rules provided by the camp. Our congregation/organization has approved the program to be carried out by this group.

**On-site Coordinator** \_\_\_\_\_

Signature \_\_\_\_\_ E-mail Address \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Home phone \_\_\_\_\_ Work phone (\_\_\_\_\_) \_\_\_\_\_

I request a confirmation of this application by email.

E-mail Address \_\_\_\_\_