



P.O. Box 415

Talcott

West Virginia

24981

304.445.7143

bethlehemfarm.net

GROUP RESERVATION FORM 2025

We would like to make a group reservation for a week at Bethlehem Farm:

Name of Institution _____

Contact Person _____

Address _____

Day Phone _____

Evening Phone _____

Email _____

** Email will be our primary form of communication unless you request otherwise

We will make every attempt to accommodate as many groups as possible. It is extremely helpful to us if groups list more than one potential week, since your group's first choice may not be available. We thank you for your flexibility. (Please see www.bethlehemfarm.net/calendar for the complete 2025 calendar).

➤ Our first choice is the week from _____ to _____

➤ Our second choice is the week from _____ to _____

➤ Our third choice is the week from _____ to _____

➤ Requested number of participants (including chaperones): ____ X \$50/person = _____ (total deposit)

▪ If Bethlehem Farm cannot accommodate this number on our requested week(s), then we need to have at least ____ participants for the trip to be feasible for us.

Please note: This form must be accompanied with your deposit of \$50.00 per person in your group, including chaperones. An email will be sent to you when your group's deposit has been received. If your group is able to reserve a week at the farm, the deposit is non-refundable. Total cost for the week is \$400.00 per person for High School and College group weeks. The \$50.00 deposit counts toward the total participation fee. The remaining balance is due Oct 31st for Jan weeks, Jan 10th for March weeks, Jan 31st for April weeks, Feb 28th for May weeks, March 31st for June and July high school weeks, May 31st for August Adult and Family Weeks, July 15th for September Adult Week, and August 15th for October weeks. Fees must be received on time in order to keep your group's reservation. Make all checks payable to Bethlehem Farm.

1) I understand I must pay in full for all awarded spots unless I cancel any unneeded spots before the remaining balance due date (Bethlehem Farm relies on participation fees to operate). Initial: ____

2) I understand that chaperones are included in the total amount of spots received. Initial: ____

3) I understand that minors cannot be transported in 11-15 passenger vans, while at Bethlehem Farm. Initial: ____

Effective October 1, 2024, the Farm is not requiring a Covid-19 test but is recommending a pre-trip test with no test results required and strongly recommend if a participant is exhibiting Covid-19 symptoms they should not attend the group week. This policy is updated when appropriate.

I have reviewed the 2025 Registration Packet and understand the 2025 policies.
(Found online: www.bethlehemfarm.net/registration)

Signature _____ Date _____

Scholarships: a participation fee of \$250/person is available for groups who would not otherwise be able to afford the full fee. Please include a written statement demonstrating financial need with this form.

If you have any questions, please visit our website: www.bethlehemfarm.net, email: volunteer@bethlehemfarm.net, or call 304.445.7143. Thank you!