



ZEPHYR POINT
Presbyterian Conference Center

CONFERENCE BOOKING REQUEST

We are glad you are interested in an event at Zephyr Point! Review the current year's [Guest Group Rates](http://www.zephyrpoint.org) at www.zephyrpoint.org for a complete listing of current rates and policies. For return bookings requesting the same space, please submit within 7 days of departure for priority consideration. All requests are processed on a first-come, first-served basis and not guaranteed until confirmed with a contract from Zephyr Point.

ORGANIZATION/ENTITY INFORMATION			
Org. Name:		Are you a new group to ZP? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:	City:	State:	ZIP:
Org. Email:		Org. Phone: ()	
Org. Type: <input type="checkbox"/> PC(USA) <input type="checkbox"/> Other Mainline Protestant <input type="checkbox"/> Catholic <input type="checkbox"/> Non-Denominational <input type="checkbox"/> Other Christian <input type="checkbox"/> Other Religious Organization <input type="checkbox"/> Educational Institution <input type="checkbox"/> Other Non-Profit <input type="checkbox"/> Business/Corporation <input type="checkbox"/> Sewing/Crafting Group <input type="checkbox"/> Family Group <input type="checkbox"/> Other _____			
COORDINATOR INFORMATION			
Name:		Role:	
Address:	City:	State:	ZIP:
Primary Phone: ()	Type: <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	Alt. Phone: ()	
Email:		Type: <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	
EVENT INFORMATION			
Event Name:		Expected Number of Attendees:	
Event Year:	Preferred Dates:	Alternate Dates:	
Event Type: <input type="checkbox"/> Family <input type="checkbox"/> Couples <input type="checkbox"/> Men <input type="checkbox"/> Women <input type="checkbox"/> Children/Youth <input type="checkbox"/> Young Adults <input type="checkbox"/> Business/Leadership <input type="checkbox"/> Sewing/Crafting <input type="checkbox"/> Activity/Athletics <input type="checkbox"/> Volunteers <input type="checkbox"/> Other _____			
FACILITIES & FOOD SERVICE			
Lodging: <input type="checkbox"/> Tallac Center <input type="checkbox"/> Tahoe Center <input type="checkbox"/> Hubbard Lodge <input type="checkbox"/> Lakeview Lodge <input type="checkbox"/> Cabin(s)_____			
Number of Guest Rooms:		Meeting Space(s) Requested:	
Meals:	Sunday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	Monday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	Tuesday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D
	Thursday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	Friday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	Saturday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D
			Wednesday <input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D
			No meals requested <input type="checkbox"/>
COMMENTS			
Submitted By:		Date:	

Updated 4/23/2023