

2025 MN Senior Adult Retreat - Lake Geneva Christian Center

Registration opens **May 26, 2025**

PLEASE RETURN THIS ENTIRE FORM WITH YOUR PAYMENT TO
605 Birch Ave. Alexandria, MN 56308

Name (main contact person) _____

Street Address _____

City/State _____ Zip Code _____

Cell Phone _____ Home _____

Email Address _____

(Email is used for communication purposes only.)

- Housing is given on a first come-first served basis.
- Please indicate any special needs here: (ASL, handicap facilities, etc.) *If you require a diet modification, ordered by your physician, please complete the back side of this form.*

This registration is for: (please list full name for each person you are registering and including payment for)

- 1) _____
- 2) _____
- 3) _____

Housing Desired:

1st Choice) _____

2nd Choice) _____

**Additional Roommates
NOT included** with this
Registration:

Price per person \$ _____ x # of people _____ = \$ _____

A REGISTRATION DEPOSIT of at least 50% of the total due for each person must be included with this registration form. Full payment is due at check-in.

Payment Information:

If paying by check, please enclose check with your registration.

Check Number _____ Check Amount Enclosed \$ _____

To pay with credit card, go to <https://onrealm.org/mnaog/give/sar25>

Date Paid _____ Confirmation Number _____

Prices



Please see the Retreat Brochure for housing details.

Package Prices

(includes housing, 6 meals, Afterglows and registration costs)

Deluxe Cottages

\$197 per person with 3 or more guests per cottage

\$216 per person with 2 guests per cottage

\$255 per person with 1 guest per cottage

Kingsriter Retreat Center & Legacy Lodge Hotel Rooms

\$178 per person with 3 or more guests per room

\$195 per person with 2 guests per room

\$231 per person with 1 guest per room

Guests need to bring their own bedding and towels for the following housing units:

Legacy Lodge Dorm Ensuites & Standard Duplexes

\$154 per person with 2/3 capacity or above, 3+ per duplex

\$166 per person with 1/2 capacity, 2 per duplex

\$207 per person with 1/3 capacity or less, 1 per duplex

Heritage Dormitories

\$145 per person

Renovated Rustic Cabins

\$145 per person

Rustic Cabins (Primitive)

\$131 per person

RV Park Prices are "Al a Carte"

LG RV Park and Hillcrest RV 101-124, 144-183

\$47 per night Full hook up (sewer, water, & electricity)

Hillcrest RV 128-143

\$36 per night Electric & water only

"Walk On" Guests

Facility Use fee for Walk-On & RV Guests:

\$25.00 per person for the event

Meal Prices for Walk On & RV Guests:

\$16.00 per person per meal

"A la carte" and
"Walk On" prices
are for those **NOT**
in the 2 night/6
meal package
pricing.

Lakeview Center Housing is not available for our 2025 event

- Please note: Specifically trained and licensed service dogs are the only animals allowed on camp property (except for in the Hillcrest RV Park). Emotional support animals are NOT permitted. LGCC requests to be notified ahead of time if a service animal is being brought to camp, otherwise a cleaning charge of \$200 per animal will be assessed if animals are found in any camp housing other than a personally owned RV in the Hillcrest RV Park.

Office Use Only

Notes:

Date Received:

Payment Type:

Check Number:

Deposit Paid:

Balance Due:

Assigned Housing:

Last Name:



Lake Geneva Christian Center

Your people, Our place, God's purpose

Diet Modification Form

In order to accommodate a special diet, LGCC kindly asks that you fill out this form and return it to the camp at least 14 days prior to attendance. Last minute requests cannot be guaranteed.

Guest's Name _____

Group or Camp attending _____

Dates of Camp attendance _____

Physicians Signature _____
(Required for individualized meals to be made)

Guests with Special Diets

Please indicate specific type of diet modifications needed, foods to be omitted or substituted, medical reason for diet modification (Diets not prescribed by a physician are individual's responsibility):

Guests with Allergies **LGCC cannot guarantee a 100% allergy free environment.

Please indicate type of allergy:

Please Note: Guests with personal lifestyle choices (ex: vegetarian or vegan), would be responsible for their own meal supplements. LGCC does provide a salad bar at lunch and dinner.

LGCC does not cook with peanuts, peanut oil, etc. However, foods shipped to camp may be made in a facility with nuts so cross contamination may happen. LGCC cannot provide a peanut free camp.

To be completed by parent/guardian for Minors

I hereby request that my child, _____, DOB _____
(Name of Child) (Date of Birth)
receive a modified diet as prescribed by his/her physician, _____
(Name of Physician)
Signature of Parent/Guardian _____ Date _____

NOTES: