

Logos House Reservation Form

Applicant Name		English	
Telephone		Email	
Address			
Name of Church or Group			
Title of Position		Number of people	
Booking Details	Arrival Date:	Time:	Departure Date: Time:

⊙ PLEASE CHOOSE THE FACILITY;

- () **Shelter 1 (Family):** Double room \$50.00 / person, night- furnished with bedding sets and a full kitchen.
- () **Shelter 2 (Group):** \$30.00 / person, night – A minimum of 10 people is required for a shelter to use. – A full kitchen, furnished with bed. Must bring personal bedding sets.
- () **Prayer House (Group):** \$20.00 / person – A minimum of 15 people is required. A full kitchen, No bedding. Must bring personal bedding sets.
- () **Guest House:** Rooms with Queen beds \$400.00/ month or \$50.00 / person, night. – A full kitchen, furnished with bedding sets.

⊙ NOTANDUMS

**** PLEASE INITIAL AFTER READING THE BELOW.**

- () Guests must read notandums before using the facilities, and should follow the guidance of associates. Logos Missions, Inc. is **NOT** responsible for any injuries and loss.
- () All the facilities are equipped with a full kitchen. Guests must bring personal cooking utensils, dishes, and tableware. Shelter 1 and Guest House have provided with cooking tools and equipment.
- () The guests for Shelter 2 and Prayer House must bring the bedding sets.
- () Guests must fill out the application for the use of sound systems in the facilities when they make the reservations.
- () Use of charcoal grills and campfire are strictly prohibited.
- () Please keep clean shelters for next guests.
- () Group reservation must applied 30 days prior to visit, and must pay the upfront fees at the time of reservation.
- () * **UPFRONT MAINTENANCE SHARING FEES** * Credit card (Visa or Master) is acceptable.
 An upfront fee that you must pay before you're allowed to visit at Logos House of;
 - **1st Retreat House:** 50% of the total amount.
 - **2nd Retreat House:** \$300.00 (\$30.00 / Person, Night x Minimum 10 people)
 - **Prayer House:** \$300.00 (\$20.00 / Person, Night x Minimum 15 people)
 - **Guest House:** Rooms with Queen beds \$400.00 / Month or \$50.00 / Person, Night.

If you would like to pay an upfront fee by Check or Credit Card, please fill out the information below:

Visa MasterCard Discover Cash Check Cardholder Name _____
 Card Number _____ - _____ - _____ Authorized Signature _____
 Expiration Date ____/____ Security Code (3-Digits) ____ Amount of Payment \$ _____ Authorized Number _____
(office use only)

Make checks payable to: **Logos Missions, Inc.**
 5235 N. Elston Ave. Chicago, IL 60630

- () **The cancellation must requested at least 2 weeks prior to the reservation date.** If the reservation is cancelled within 2 weeks of reservation date, the upfront fee will not be refunded.
- () Free for the children under the age of 7. Number of children _____.
- () **50% OFF** for the members of Christian Mutual Med-Aid. (Duplicate discounts will not be honored).
- () **30% OFF** for the missionaries and pastors. (Duplicate discounts will not be honored).
- () **20% OFF** from second day for full-pay guests. (Duplicate discounts will not be honored).
- () Maintenance sharing fees for non-reserved people will be charged on check-out date.
- () Donations (tax deductible) are welcome. The additional or remaining balance and donations may be placed in the offering box.
- () Donations and fees are to be used for maintenance facilities.

For further information please contact us at 773-777-8889 Ext. 3210) or
 Direct: 714-333-7487 (voice mail), Fax 773-777-0695, E-mail: logoshouse@gmail.com.
 By signing below, I attest to the fact that I understand and will observe the rules and regulations of **Logos House**.

Name _____ Signature _____ Date _____