

Highland Lakes Camp & Conference Center Rental Setup Checklist - Camp

Group Name:	For HLC Use Only:		
Event Date:	Date Received: By:		

All Equipment, Facilities, and Activities are available on a "First Request-First Served" basis.

Notification will be given if equipment or activity is unavailable.

Complete and send in this document at least 3 weeks prior to event.

Equipment Needs — check any areas of need and note that some additional charges apply.

Audio-Visual Equipment			f Cart Reservations —check if needed	
	70" TV	All	Golf Carts are adult use only and are subject to HLCCC	
	# Music Stand	regulations.		
	Portable PA System, Speaking Only w/1 microphone	Pric	or to operating, driver must sign a HLC Release of Liability	
	Portable PA System, multi input Vocal/Instruments:		6 Seater Limo Golf Cart: \$50 per day	
	# of microphones needed		4 Seater Golf Cart: \$50 per day	
	# of instrumental inputs (we do not provide instrument cables)		I plan to bring my own golf cart(s).	
	8 max total inputs - mics/instrument inputs			
	# Wireless Handheld Microphone; requires multi input PA		Required: Sketch Meeting Room Layout	
	# Portable Video Projector		attach additional sheet if needed	
	Technician Services			
Star	ndard Equipment			
	Dry Erase Board w/easel & supplies			
	Podium			
	Projector Screen			
	Tables: complimentary tables are limited to 10. Additional tables are \$5.00 per table.			
	# 8ft long			
	# 6ft long			
	# 5ft round (require table cloths)			
	Other - specify style			
	Wi-Fi Hotspot – Location:			
Cha	ir Arrangement —Check One			
	Chairs #Location:			
	Chairs #Location:			
	Lecture style-Chairs in rows			
	Choir Style-Semicircle Rows (50 chairs or less only)			
	Classroom Style-Chairs behind one side of table			
	Board Room Style-Tables together with chairs around			
	Tables in a "U" with chairs around			
	Other - indicate			
	I prefer to set the equipment myself.			

Anticipated Check-In Time______ Anticipated Departure Time _____

Standard check in is 3:00pm; check out is 10:00am.



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Recreation & Activities

Indicate Day, Time, and # of Participants

Additional Fees Apply. See HLCCC Rates and Amenities for more information and pricing. Recreation <u>MUST</u> be scheduled at least three weeks in advance.

	Silent Disco:	Hexapod Activities:	
	Day Time, # of participants	☐ HEXAPOD – Full Course with Zip Line:	
	DJ	Day, Time, # of participants	
		☐ HEXAPOD - Elements Only:	
Range Activities: All Activities should be scheduled between 9am - 4pm.		Day, Time, # of participants	
	Rifle Range: BB Guns	☐ HEXAPOD – Zip Line Only:	
	Day, Time, # of participants:	Day, Time, # of participants	
	Archery	□ ROCKWALL:	
	Day, Time, # of participants:	Day, Time, # of participants	
	Archer's Quest:	☐ Campfire: 1 hour sessions; 8pm, 9pm, 9:30pm	
	Day, Time, # of participants:	Day, Time:	
	Gellyball:	Not available during County – Wide Burn Ban	
	Day, Time, # of participants:	Skewers are available upon request; advanced notice required	
Res	ter Activities: Weather & Lake Levels permitting; May-September only. ervation for exclusivity of swimming pool, swim pond, and boat vities is restricted to one 2 hour block of time per day. Swim Pond – Inflatables, Slides, and Kayaks & Stand Up Paddle boards:	ack Shack & General Store (latest closing time 10:45pm) icate if you would like either open and when.	
	Day, Time, # of participants:	Snack Shack:	
	Ski Boat w/ Banana Sled:	☐ General Store:	
	Day, Time, # of participants	We offer the following free amenities - first come first serve:	
	Pool: Day Time, # of participants	Baseball/Softball/Kickball field, Soccer Field, Sand Volleyball Court, Dis Golf, GaGa Ball, Human Foosball, Cornhole, 9 Square, Crossnet, Pickleball, Polypong, Fishing - License required, catch and release, brin your own equipment and bait	
8:00 tim	al Times — List meal schedule and special needs below. O am, 12:00 pm, and 5:30 pm; meal time can be adjusted 30 minutes in e e and together. Dining Hall closes at 7pm. ferred meal times:		
The	etotal number of guests in your group that will be attending each meal?		
Foo	nd allergy or dietary restriction? YES NO List their name and food aller	gy or restriction; Attach additional sheet if necessary:	
	☐ Complimentary Water Station:	☐ Bags of Ice: \$5.00	
	Day, Time, Location:	Day, Time, Location:	
		1 Gallon of Coffee, includes Creamers & Sweeteners: \$12.00 # of gallons:	
	Day, Time, Location:	Day, Time, Location:	