

ONSET CAMPGROUNDS
C/O Barbara Porter
PO Box 944
Onset, MA 02558

HOUSING/ROOM REQUEST

Arrival Date: _____ Departure Date: _____
Name: _____ Tele. No.: _____
Mailing Address _____

Facilities Requested:

___ Roberts House 2nd floor singles only:
No. of days ___ X \$30 per night = _____ X No. of rooms ___ = _____

___ Cookson House Rooms \$30 per night for single and \$70 per night for double:
No. of days ___ X Rate _____ = X No. of rooms ___ = _____

___ Cookson House entire home \$600 per week:
No. of weeks ___ X \$600 = _____

MAINTENANCE DEPOSIT ___\$50_____
TOTAL _____
LESS DEPOSIT _____
BALANCE DUE _____

Make all checks payable to: COMMUNITY OF CHRIST

Signature: _____ Date: _____

- All rules and regulations are posted in each building.
- **DUE TO ALLERGIES--NO PETS ARE ALLOWED ON THE PREMISES**
- The Onset Campgrounds shall not be liable for any personal injury or damage to license's property in, or about the premises if said damages or personal injury are alleged to be the fault of or caused by the negligence or carelessness of the Onset Campgrounds.
- Weeks are Sunday through Saturday. Weekends are Friday and Saturday nights. Checkout time is 12:00 noon.
- Housing is not reserved unless a deposit of one half the rent plus the maintenance deposit accompanies this signed and dated form ONE MONTH prior to the arrival date requested.

Any questions call (508) 295-5504 Barbara Porter (Email) thermometerman@aol.com