

**AME Zion Church Connectional Lay Council Evangelistic Retreat - OCTOBER 5 - 6, 2018**

**Ridgecrest Lodging Facility Room Accommodation Form  
(Ridgecrest will accept call in reservations at 800-588-7222)**

Name \_\_\_\_\_ Email \_\_\_\_\_

Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Country \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ (Check in at 4pm) DEPARTURE DATE \_\_\_\_\_ (Check out at 10am)

**RIDGECREST HAS A 2 NIGHT MINIMUM STAY - FRIDAY - SUNDAY (If you plan to arrive on Thursday, please note this in "Arrival Date")**

**Deposit - 1 night's room accommodation. 2 Required Breakfasts must be paid for at check in (or if you are registered with CLC Retreat, your breakfast at Ridgecrest will be complimentary on Saturday and Sunday morning)**

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**Guest Room Accommodations: (Check-in at 4pm / Check-out at 10am)**

Select which room type to reserve:

\_\_\_\_\_ **Mountain Laurel 2 Queens**  
\$129.00 per night Single or Double Occupancy  
\$139.00 per night (3 people in room) - Triple  
\$149.00 per night (4 people in room) - Quad

Photo:



\_\_\_\_\_ **Pritchell Single/Double Room**  
\$79.00 per night Single or Double Occupancy  
\$89.00 per night Triple

Photo:



\_\_\_\_\_ **Pritchell 1 Queen Room**  
\$79.00 per night Single or Double Occupancy

Photo: Similar to photo above

\_\_\_\_\_ **Pritchell 2 Queen Beds**  
\$79.00 per night Single or Double Occupancy  
\$89.00 per night Triple  
\$99.00 per night Quad

Photo: Similar to photo above

**2nd Choice of Accommodations in case 1st choice sells out \_\_\_\_\_**

Names of guests in your room (note Children's name and age): (This is required to obtain Meal Tickets for meals below)

\_\_\_\_\_  
Age \_\_\_\_\_  
\_\_\_\_\_  
Age \_\_\_\_\_  
\_\_\_\_\_  
Age \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

**Meals:** Please check additional meals you would like to order in the Dining Room at Ridgecrest during your visit. All meals are buffet-style.

Insert # of people:	Totals:
# _____ Thursday 10/4 Dinner @ 14.00 per person (If arriving a day early)	\$ _____
# _____ Friday, 10/5 Breakfast @ \$10.00 per person <b>(Required)</b>	\$10.00
# _____ Saturday, 10/6 Dinner @ 14.00 per person	\$ _____
# _____ Sunday 10/7 Breakfast @ \$10.00 per person <b>(Required)</b>	\$10.00
<b>Total</b>	<b>\$ _____</b>

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TOTAL COST: (add each line in total column)

Room Cost \_\_\_\_\_ X 2 nights = \$ \_\_\_\_\_

Meal Cost \_\_\_\_\_ X # \_\_\_\_\_ Adults = \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

Please submit form and payment to:  
Ridgecrest Conference Center  
PO Box 128  
Ridgecrest, NC 28770  
\*Or email to: [ridgecrest@lifeway.com](mailto:ridgecrest@lifeway.com)

