



Legacy Retreat Center RESERVATION REQUEST FORM

LEGACY RETREAT CENTER

1803 Wilson Bridge Road

Homer, GA 30547

Tim Garrett, Legacy Operations Manager

To schedule a site visit, please contact Tim Garrett (770) 841-0026 or tim@ngacog.org

Church or Group _____

Group Leader _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____

Cell Phone _____

Email _____

Approximate Number Attending _____

Nature of the Event _____

Number of meals your group will be eating _____

- 1st Date Requested _____

Arrival Date _____ Time _____ Departure Date _____ Time _____

- 2nd Date Requested _____

Signature _____ Date _____

1. **To begin the reservation process**, please submit this form along with the completed information on the Legacy Price List.
2. Upon receipt of your information, you will be contacted regarding the availability of the requested rental date.
3. Once a date has been agreed upon, you will receive a LEGACY RENTAL AGREEMENT for signature.
4. **Upon receipt of your signed LEGACY RENTAL AGREEMENT and \$500 deposit, the date will be confirmed on the Legacy calendar.** (Note: Following the event, upon final inspection of the facilities, the rental deposit will be returned via mail.)

PLEASE MAIL, FAX OR EMAIL INFORMATION TO:

North Georgia Church of God Executive Office

Attention: Jan Baird

962 Parkside Walk Lane

Lawrenceville, GA 30043

EMAIL: jan@ngacog.org FAX: (770) 274-1165 PHONE: (770) 274-1155