

SHORT TERM CAMPING & FACILITY RESERVATION FORM

for BSA Scouting Units, District, & Council Events at:

CAMP HERMS

1100 James Place, El Cerrito, CA 94530

NOTE: Reservations are NOT SCHEDULED until you receive a confirmation email with receipt for payment of all fees. Shooting Ranges & campfires requires submission of valid certifications/permits listed at least 2 weeks prior to arrival date. Please **DO NOT** arrive at any GGAC Camp without your confirmation packet (fees subject to change without notice).

RESERVATION PROCEDURES

1. UNIT LEADER/Event Chair digitally fills out this APPLICATION completely (*use Adobe Reader to fill & save!*)
2. UNIT LEADER/Event Chair gathers copies of all required CERTIFICATIONS, including Fire Permit if appropriate.
3. UNIT LEADER submits completed APPLICATION via email to camping@ggacbsa.org the PROGRAM REGISTRAR at the GGAC Outdoor Programs Department.
4. PROGRAM REGISTRAR will SCHEDULE reservation and send CONFIRMATION EMAIL with PAYMENT RECEIPT and all needed information to the Unit Leader and Camp Ranger.
5. UNIT LEADER/Event Chair follows CHECK-IN procedure with CAMP RANGER upon arrival with CONFIRMATION PACKET readily available if needed.
6. UNIT LEADERSHIP is responsible for supervision of all campers throughout duration of their stay.
7. UNIT LEADER/Event Chair follows CHECK-OUT procedure with CAMP RANGER prior to departure.

RESERVATION/EVENT INFO -- *all overnight camping reservations begin 5:00pm on arrival date and end 4:00pm of departure date.*

Arrival/Start DATE: _____ Est. Attendance: _____ Youth (under 18)

Departure/End DATE: _____ Adults (18+)

Unit Type: _____ Unit #: _____ GGAC Dist./Council: _____

If District or Council Event – Name of Event: _____

UNIT CONTACT INFO

 -- *for District or Council Events list the Camp Director/Event Chair & Registrar for the event*

Adult Leader in Camp: *(first and last name)*

Reservation Contact: *(first and last name)*

Unit Position: _____

Unit Position: _____

Address: _____

Address: _____

City: _____ Zip: _____

City: _____ Zip: _____

email: _____

email: _____

Day Phone _____

Day Phone _____

Cell Phone _____

Cell Phone _____

CAMPSITE AND FACILITY REQUESTS ON PAGE 2

SHORT TERM CAMPING & FACILITY RESERVATION FORM

CAMP HERMS

ENTIRE CAMP RENTAL\$900/day

SLEEPING SITES & FACILITIES

DOGPATCH CABINS (48max) \$75

HIKE-IN UPPER RIM CAMPSITES \$25
(Rustic sites with NO restrooms! Water and hose are present. A temporary fire pan available from the Ranger)

SLEEPING & PROGRAM AREA COMBO

REDWOOD GROVE & FIELD \$250

RESOURCE & PROGRAM FACILITIES

Lodge & Kitchen (125max) \$175

Lodge *(seating & stage area only)* \$100

Kitchen Only \$100

Talmadge (North Room)..... \$50

Quarry \$100

SHOOTING RANGES - *In order to access any Shooting Range your Unit **MUST** submit all required certifications at least 2 weeks prior to your arrival at camp. If certifications are not received your reservation for those facilities will be cancelled.*

AM 9:00am – 12 noon \$50

PM 2:00pm – 5:00pm \$50

FULL 9:00am – 5:00pm \$80

Target Fees *(list # of targets requested)*

___BB Targets (5 shots per) 25¢ ea

Archery *(18+ RSO req'd)*

AM PM FULL

BB Gun *(21+ RSO & NRA Instructor req'd)*

AM PM FULL

Tomahawk *(18+ RSO req'd)*

AM PM FULL

PARKING: The on-site parking lot is EXTREMELY limited. Please carpool to events whenever possible.

CAMPFIRES: An El Cerrito Fire Department issued **FIRE PERMIT is REQUIRED** for ALL campfires at Camp Herms. During Fire Season (August – October) permits are not issued. A copy of the permit **MUST** be submitted at least 2 weeks prior to arrival to have a fire in your campsite [APPLY HERE](#)

CLEANING/DAMAGE: In the event damage to camp property has occurred or cleaning service is needed when your group departs. An invoice for those fees will be send to the Unit. Incurred fees are to be paid within 30 days.

PAYMENT INFORMATION *Payments may also be submitted via phone to GGAC Outdoor Program at: 510-577-9218*

VISA Mastercard billing zip: _____

Card # _____ exp: _____

Signature: _____

Printed Name: _____

RESERVATION FEE TOTALS		
Sleeping Site Fees	All Other Fees	TOTAL Fees Due

THIS SECTION FOR OFFICE USE ONLY

Date Rec'd	Fees Rec'd	Certs Rec'd	Scheduled	Confirm w/ Unit	Check-In	Check-Out