



25458 Dan Brown Hill Rd., Brooksville, FL 34602 (352) 796-4097 www.LakewoodRetreat.org

APPLICATION FOR ANNUAL PASS CLUB MEMBERSHIP

Lakewood Retreat is a privately owned 501c-3 ministry existing for the purpose of providing and maintaining a place for Christian education, fellowship, wholesome and supervised recreation for all ages without regard for race, color, creed, or place of residence under such proper guidance, conditions and environment as the corporation may determine according to the principles of the Statement of Faith which is in accord with the Mennonite Faith.

Annual Pass Club members enjoy the privilege of visiting Lakewood throughout the year with prepaid facility use charges. Use of the grounds, trails, games, pool, and canoes is all included. Not included in club membership are lodging fees, food, staffed activities, and retail purchases, should these be chosen. Blackout dates may apply. See the news and events page on the website or call ahead to check any restrictions. An annual pass expires at the end of the issued calendar year. Pass prices begin proration after May 31st. Pass purchases after September 30th include proration to the end of the year plus the following year. Family membership includes all those and only those consisting of parents and children living together in a household.

Annual Pass Club members must meet criteria which reflects the values and purpose of the ministry at Lakewood Retreat. The following application is required to be completed in full and accepted by the management of Lakewood Retreat to become an Annual Pass Club member.

Your application will be r	eviewed along with	a check of you	r references indic	cated below.
Name:		 		
Address:	(Street)		(City, State)	(Zip code)
☐ I am over age 18				
Telephone: Home (Cell (
My Christian testimony:	(When did you meet Jes	sus Christ and wh	nat does Jesus mea	n to you?)

PLEASE LIST NAMES OF FAMILY MEMBERS LIVING IN YOUR HOUSEHOLD:

Name:		Relationship: Relationship: Relationship: Relationship: Relationship:							
					Name:				
						onal family members on the			
					List your pastor / ministe	r and three references or	r persons (other than family mer	mbers) .	
					Name	Address	Telephone numbers	Position	
					(Pastor or Minister)	(Church & Town)			
I/We will abide by the r AGREEMENT".	rules set forth in the "	DAY USE & SEASON PAS	S HOLDER						
Signature:		Date:							
Approved:(Lakewood Ret		Date:							
(Lakewood Ret	reat Management)								