

# QUEST HOUSING REQUEST FORM

This Housing Request Form is due 10 days prior to arrival. Send to Pat Zimmer:

PatZimmer@glcc.org • Fax: (920) 294-3686  
Mail: Pat Zimmer, Green Lake Conference Center  
W2511 State Rd. 23, Green Lake, WI 54941

Quest Week Dates \_\_\_\_\_

Church Name \_\_\_\_\_

Leader Name \_\_\_\_\_

Each two adjoining rooms share a shower and bathroom facilities. Each set of six indicates two rooms with an adjoining bathroom. Please complete **all** information. Please print names.

NOTE: For the student's grade, please indicate the grade he or she will be **entering in the fall following** this summer.

## Female Youth & Adults

Name	Leader Yes or No	Age	Grade	Shirt Size
1.				
2.				
3.				
Bathroom				
1.				
2.				
3.				

Name	Leader Yes or No	Age	Grade	Shirt Size
1.				
2.				
3.				
Bathroom				
1.				
2.				
3.				

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NOTE: For the student's grade, please indicate the grade he or she will be entering in the fall **following** this summer.

**Male Youth & Adults**

<b>Name</b>	<b>Leader</b> Yes or No	<b>Age</b>	<b>Grade</b>	<b>Shirt Size</b>
1.				
2.				
3.				
<b>Bathroom</b>				
1.				
2.				
3.				

<b>Name</b>	<b>Leader</b> Yes or No	<b>Age</b>	<b>Grade</b>	<b>Shirt Size</b>
1.				
2.				
3.				
<b>Bathroom</b>				
1.				
2.				
3.				