

# STURGIS WEEK, August 9-13, 2010

## Lodging Opportunity for Christian Bikers at Wheaton College Black Hills Science Station

### Location:

Wheaton College's Science Station is located about 8 miles west of Rapid City, South Dakota, about 30 miles from Sturgis in the Black Hills of South Dakota. To learn more, check out the College website at [www.wheaton.edu/BlackHills](http://www.wheaton.edu/BlackHills).

### Accommodations:

The camp has 5 cabins, 4 apartments, 5 guest rooms and 2 dorms, plus swimming pool. While pillows and blankets are provided, everyone needs to bring their own linens (pillowcases, sheets) and their own towels and washcloths. There is a washing machine on the premises, but guests need to bring their own laundry detergent.

- Cabins will sleep 3-4; they have 2 bedrooms, a living room, bathroom and full kitchen. One bedroom has a double bed; the other bedroom has 2 bunks.
- Apartments will sleep 3-4; they have 1 bedroom, a futon in the living room, a bathroom and a full kitchen.
- Guest rooms will sleep 2; they consist on one open room with 2 bunks plus a full bath. There is no kitchen.
- Dorms consist of bunks with a community bath. You will need to bring your own pillow, sleeping bag, etc.

### College Policy:

All alcoholic beverages, illegal drugs, firearms, smoking and gambling are strictly prohibited in all Wheaton College Science Station buildings and throughout the property. Violators will be asked to leave; no refunds will be granted. In addition, all visitors must sign and return the Wheaton College Science Station Visitor Usage Waiver and Release of Liability form.

### Registration and Cancellation Information:

Before mailing your registration form and check, please confirm room availability by either calling or emailing Mark Cruse at 630-668-3286 or [mcruse1@att.net](mailto:mcruse1@att.net). After verifying room availability, please tear off and mail registration form, check, and waiver form to Mark Cruse, 615 Belmont Lane, Carol Stream, IL 60188. *Registrations must be received by July 1<sup>st</sup>; cancellations received after July 1<sup>st</sup> will not be refunded.*

**Registration Form:** Please make checks payable to *Wheaton College*.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Please circle arrival/departure dates:**

Check-in begins August 9, all day.

**August 2010**

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

**Please indicate your lodging preferences:**

	TOTAL
Cabin: ___# of people ___# of nights = (\$150 per cabin per night)	\$ _____
Apartment: ___# of people ___# of nights = (\$150 per apartment per night)	\$ _____
Guest Room: ___# of people ___# of nights = (\$60 per room per night)	\$ _____
Dorm: ___# of people ___# of nights = (\$30 per person per night)	\$ _____

In consideration for my visit to and/or rental of facilities at Wheaton College's Science Station in Rapid City, South Dakota (the "Station"), **I hereby forever release and covenant not-to-sue** Wheaton College, the Wheaton College Board of Trustees, and any of their employees, instructors, volunteers, agents, and all other representatives, **from any and all present and future claims resulting from ordinary negligence on the part of Wheaton College or Wheaton College's representatives** for property damage, personal or bodily injury, or wrongful death, arising as a result of my entry or stay, the entry or stay of any minors or dependents associated with me, or any activities incidental thereto, wherever, whenever, or however the same may occur, **I hereby voluntarily waive any and all claims both present and future, resulting from ordinary negligence, that may be made by me, my family, estate, heirs, or assigns, and I relinquish on behalf of myself, spouse, heirs, estate and assigns the right to recover for injury or death.**

I agree to follow the guidelines and instructions for facility rental and usage as posted or as given to me by Wheaton College and Wheaton College's representatives at the Station. **I further agree to indemnify and hold harmless Wheaton College and Wheaton College's representatives** for any and all claims arising as a result of my stay, or the stay of any minors or dependents for whom I am responsible, or as a result of any activities incidental thereto, wherever, whenever, or however the same may occur, including specifically but not exclusively the actions of other visitors and/or renters.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of the state of Illinois, and I agree that if any portion is held invalid, the remainder of this waiver will continue in full legal force and effect., I further agree that the venue for any legal proceedings shall be in DuPage County in the state of Illinois.

I affirm that I am of legal age and am freely signing this agreement. **I have read this form and fully understand that by signing this form, I am giving up legal rights** and/or remedies which may be available to me or to my minor children and/or dependents for the ordinary negligence of Wheaton College or any of Wheaton College's representatives.

CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING!

(Signature of Visitor) Date Signed \_\_\_\_\_

(Address and Telephone Number of Visitor) \_\_\_\_\_

(Signature of Witness) Date Signed \_\_\_\_\_

(Address and Telephone Number of Witness) \_\_\_\_\_

### **Wheaton College Science Station Visitor Usage**

#### **Waiver and Release of Liability**