



Please read and print the form below and return to ServantCARE, P.O. Box 151, Vance, South Carolina 29163 after you have signed, dated and had witness sign and date. If you send it to any other address on our site it won't get to us and won't count so please be conscious of correct address when sending. Thank you for your understanding!

Dear ServantCARE,

I _____ have read, understand, and agree to the legal information and disclaimer at the beginning of the Hospitality Home section of ServantCARE's website, as well as all material pertaining to the ministry of ServantCARE's hospitality homes.

I agree not to use the hosts names and addresses where I stay for building my own mailing list or support base. I understand that only those who have been referred to ServantCARE may use these hospitality homes and I agree to not give the names, address, or phone number of my hosts out to anyone.

Furthermore I agree not to contact them on my own. I understand they are part of the ministry team and will coordinate all future stays through the ServantCARE office.

I understand there are no charges "at most" hospitality homes; however this referral ministry of ServantCARE is partially funded by the donations of those using the service. All donations are \$15 (in US funds) per night (per family) and I agree to that amount. I understand that if I chose one of the referrals that do have a nominal fee with it any financial arrangements must be between me and the parties involved. If I desire ServantCARE make the reservation I understand there is a non-refundable \$25 (in US funds) registration donation.

Guest Name (Printed)

Guest Signature

Date

Witness Name (Printed)

Witness Signature

Date