

**Bemidji State University – Outdoor Program Center
Hobson Forest Cabin Facility Request Form**

Organization _____ Contact
Person _____

Address _____ Phone
number _____

Advisor or Contact Person's
signature _____

Date(s) requested: From _____ to _____ number of
people _____

Specific use request (check all that apply):

- ___ Cabin #1 (large w/ wood stove)
- ___ Cabin #2 (small w/ wood stove)
- ___ Campfire (in designated ring only)
- ___ Camping (in designated area only)
- ___ Hiking
- ___ Ski touring
- ___ Other (please

explain) _____

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User Polices:

- 1) Under NO circumstances is alcohol or other drugs permitted on the premises.
(University property = University policy)
- 2) Cars/ trucks/ motorized vehicles are only permitted in the parking lot and on direct road to cabins, motorized vehicles are NOT permitted on trails! If you need to drive to the cabins please use only one or two vehicles and keep the gate closed and locked behind you to prevent illegal use.
- 3) All facilities (cabins and surrounding area) must be cleaned thoroughly (cabins swept, trash picked up from yard and packed out).
- 4) Campfires must be confined to designated fire ring (near large cabin). Fires must be completely out after use.
- 5) Cabins and cabin road gate must be locked and secured after use.
- 6) Please help us to maintain and protect the facilities by reporting any damages to the Hobson Coordinator or OPC staff upon you return.

User Contract:

I, the undersigned, on behalf of my organization or group, understand and hereby expressly waive, release and discharged all claims for liability for the injury or damages on the part of Bemidji State University and the Outdoor Program Center and their representative(s), or any individual acting in an official or advisory capacity.

Signature _____
Date _____

Hobson Coordinator Approval _____
Date _____

OPC Director Approval _____
Date _____

Hobson Deposit and Fees

Deposit amount: _____

Deposit check #: _____
(\$100 deposit required)

Date reserved _____ Staff
sign _____

Date out _____ Staff
sign _____
(key and fire extinguisher @ time of check out)

Amount paid _____
sign _____
(check Hobson rentals at beginning of book)

Staff

Date in _____
sign _____

Staff

____ Fire Extinguisher
____ Hobson Key

Hobson Coordinator Check In

Date Checked _____

Comments

Hobson Coordinator Approval _____

Date _____

(you can return the deposit, if not signed do NOT return)

Deposit Returned on _____
sign _____

Staff