

# Baptist Conference Center at Bonnie Doone Plantation

5878 Bonnie Doone Road, Walterboro SC 29488

Reservations: 843-893-3396

For reservations, please return Form A (Group information), Form B (Accommodation Request), Form C (Other facilities and Needs Request) and deposit. Make checks payable to: Friends of Bonnie Doone 5878 Bonnie Doone Rd, Walterboro SC 29488

## Form A (Group Information)

Group Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

Total number of adults: \_\_\_\_\_ (Male \_\_\_\_\_ Female \_\_\_\_\_ Couples \_\_\_\_\_ )

Total number of youth (grades 7-12): \_\_\_\_\_ (Male \_\_\_\_\_ Female \_\_\_\_\_ )

Total children: (infant-grade 6) \_\_\_\_\_

Grand total (all ages): \_\_\_\_\_

Note: One adult per eight youth or children is required.

Date of Arrival: \_\_\_\_\_ Time: \_\_\_\_\_ Date of Departure: \_\_\_\_\_ Time: \_\_\_\_\_

Meal times and rates:

Breakfast 8:00 AM; included with overnight accommodations.

Lunch 12:00 Noon; \$10.00

Dinner 6:00 PM (7:00 PM on Friday); \$15.00

Meals desired (circle):

Date: \_\_\_\_\_ breakfast, lunch, dinner

Date: \_\_\_\_\_ breakfast, lunch, dinner

Date: \_\_\_\_\_ breakfast, lunch, dinner

Date: \_\_\_\_\_ breakfast, lunch, dinner

Date: \_\_\_\_\_ breakfast, lunch, dinner

Note: For Tours and Special Events, Lunch and Dinner rates vary from \$18 - \$29 per person.

*Effective Winter 2016*

# Baptist Conference Center at Bonnie Doone Plantation

## Form B (Accommodation Request)

Group Name: \_\_\_\_\_ Dates of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Check one:

\_\_\_\_\_ Our meeting is a day event. No overnight accommodations are needed.

\_\_\_\_\_ We need overnight accommodations for the following nights:

**(Please list the number of persons staying in each requested room.)**

**Mansion** – Minimum of 15 people. Sleeps up to 36 (towels and linens included).

Continental Breakfast included.

\_\_\_\_\_ Room #1 – 2 double beds/1 single bed\*

\_\_\_\_\_ Room #2 – 2 double beds/1 single bed\*

\_\_\_\_\_ Room #3 – 2 queen beds/1 single bed\*

\_\_\_\_\_ Room #4 – 2 queen beds\*

\_\_\_\_\_ Room #5 – 2 double beds\*

\_\_\_\_\_ Room #6 – 1 double bed

\_\_\_\_\_ Room #7 – 1 double bed

\_\_\_\_\_ Room #8 – 1 double bed

\_\_\_\_\_ Room #9 – 1 double bed

\_\_\_\_\_ Room #10 – 1 double bed

\_\_\_\_\_ Room #11 – 2 double beds\*

\_\_\_\_\_ Room #12 – 2 single beds \*\*

\*includes private bath \*\*handicap accessible

**Caretaker House** – Minimum of 15 people. Sleeps up to 16 (towels and linens included).

Continental Breakfast included.

\_\_\_\_\_ Room #1 – 1 double bed

\_\_\_\_\_ Room #2 – 1 double bed

\_\_\_\_\_ Room #3 – 2 single beds

\_\_\_\_\_ Room #4 – 2 single beds

\_\_\_\_\_ Room #5 – 2 single beds

\_\_\_\_\_ Upstairs – 1 double beds/4 single beds

\*Shared bathrooms\*

**Cabins (3)** – Minimum of 15 people. Sleeps up to 74 (must provide own towels and linens).

Continental Breakfast included.

\_\_\_\_\_ Camellia – 20 single bunks

\_\_\_\_\_ Magnolia – 20 single bunks

\_\_\_\_\_ Live Oak – 34 single bunks

### Tents

\$10 per person per night with your own tents. Minimum group rates of \$150.00 per day. (Must have 15 people) Use of bathroom and showers included. Breakfast is not included, but may be purchased.

\_\_\_\_\_ number of campers

Check in time: 3:00 PM (10:00 AM if arriving for lunch)

Check out time: Mon - Sat. 11:00 AM (2:00 PM if staying for lunch); Sunday 10:00 AM

# Baptist Conference Center at Bonnie Doone Plantation

## Form C (Other facilities and Needs Request)

Group Name: \_\_\_\_\_ Dates of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone(s): \_\_\_\_\_

**The following facilities/activities are available free of charge for groups purchasing meals and/or overnight accommodations: (Please circle your requested needs.)**

Indoor Chapel

Vesper Island Outdoor Chapel – NO bonfires at vesper island

Sports fields

Meeting Rooms. Number of people \_\_\_\_\_

Fishing (bring your own tackle)

Bicycles

TV/26 inch

VCR

DVD player

Screen

Swimming Pool

**There are additional charges for the following: (Please circle your requested needs.)**

Bonfire One included in room prices (\$25 per night for additional)

Canoes\* (\$5 per person/day)

Hay ride (\$25 per day)

11-Element Low Ropes/Challenge Course: call for quote as fee is dependent upon group needs

\* Each group must furnish their own trained lifeguard (from a nationally recognized certifying body) in order to use the swimming pool and/or canoes. Proof of certification must be provided.

**NOTE:** Your group is responsible for any damages occurred as a result of your actions during your event. Your group will be billed for labor and materials for any repair work needed as a result of the damage.

# Baptist Conference Center at Bonnie Doone Plantation Accommodation Rate Sheet

<b>Mansion</b>	<b><u>People Per Room</u></b>	<b><u>Price</u></b>
Rooms 1-5, 11 (private bath)	1 2 3 4	<b>\$1300 for the entire Mansion</b>
Rooms 6-10, 12 (share hall bath)	1 2	
<b>Caretaker House</b> Rooms 1-5  (share hall bath)	1  2	<b>\$500 for the entire CareTakerHouse</b>
<b>Upstairs</b>	<b>Per Person</b>	
<b>Cabins</b>	<b>Per Person</b>	<b>\$35</b>

# Baptist Conference Center at Bonnie Doone Plantation

## Weddings

### Rates

- \$3500.00 – Wedding

For a Saturday wedding, the Price includes access to the property all day Friday and Saturday, including the rehearsal, wedding and reception. The wedding can be indoors or outdoors.

### Payment

- All rate deposits are non-refundable.
- 50% of rate is due within two weeks of booking to confirm reservation.
- The balance is due three (3) months prior to the wedding.

### Security Deposit

A security deposit of \$250.00 is due within two weeks of booking. An inspection of the buildings and premises used will take place the day after the wedding. If approved, the security deposit will be refunded the following week.

### Questions

*Will our wedding be the only event at Bonnie Doone during the weekend?*

The main purpose of the conference center is to provide a retreat setting for Christian groups. Please be aware there may be other retreat groups on the property during the weekend of your wedding.

*Do we need our own wedding coordinator?*

Yes and your wedding coordinator will need to work closely with a conference center representative.

*Are there restrictions on what can be thrown at the bride and groom?*

Yes, we allow birdseed or bubbles, but only outside. Throwing of rice is prohibited.

*Do you provide or rent tables, linens, and chairs?*

NO!

*Can an outside catering company be hired?*

You may hire an outside catering company to meet your food, non-alcoholic beverage, and set-up needs. However, due to health regulations, neither the wedding party nor the caterer will have access to the kitchen facilities.

*What happens if it rains?*

In case of rain, the ceremony and reception will be held inside the mansion ballroom.

*Can the wedding party stay in Bonnie Doone accommodations?*

Yes, if space is available and the minimum number is guaranteed. Also, special meals may be available at additional rates upon request. See next section.

### **Accommodations and/or Meals**

If accommodations and/or meals are requested, please complete the appropriate forms:

- Form A: Group information/Meals Request
- Form B: Accommodation Request
- Form C: Other Facilities and Needs Request

### **Code of Conduct**

- Guests should refrain from wearing clothing that:
  - Is overly revealing or risqué in nature.
  - Depicts inappropriate or offensive messages, logos, slogans, or images.
- Use of alcoholic beverages or illegal drugs is prohibited.
- All conference center buildings are smoke-free environments. Smoking is permitted outside on the conference center grounds.
- Profanity or offensive language is prohibited.

Effective Winter 2016

Baptist Conference Center at Bonnie Doone Plantation

# Baptist Conference Center at Bonnie Doone Plantation

5878 Bonnie Doone Road, Walterboro SC 29488

Reservations: 843-893-3396

For reservations, please return this form, a non-refundable deposit of 50% of rate, and a security deposit of \$250.00 within two weeks of booking to confirm reservation. Make checks payable to: Friends of Bonnie Doone Plantation 5878 Bonnie Doone Rd, Walterboro SC 29488

## Wedding Reservation Form

**Bride:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Groom:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Wedding Coordinator:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

Estimated number of wedding attendance: \_\_\_\_\_

Will a rehearsal take place? Yes \_\_\_\_\_ No \_\_\_\_\_. If so, date/time? \_\_\_\_\_

Will a rehearsal dinner be at Bonnie Doone? Yes \_\_\_ No \_\_\_ Time? \_\_\_\_\_ # of guests? \_\_\_\_\_

**Day/Date/Time of Wedding:** \_\_\_\_\_

Will a reception be held at Bonnie Doone? Yes \_\_\_\_\_ No \_\_\_\_\_. Time: \_\_\_\_\_ - \_\_\_\_\_

Are you bringing your own food and refreshments? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you hiring an outside catering company? Yes \_\_\_\_\_ No \_\_\_\_\_

Does your group need overnight accommodations at Bonnie Doone? Yes \_\_\_\_\_ No \_\_\_\_\_

Does your group need any meals prepared by the Bonnie Doone staff? Yes \_\_\_\_\_ No \_\_\_\_\_

I have read the Code of Conduct and agree that my group will abide by the policy.

\_\_\_\_\_  
Printed name    Signature    Date

# **The Baptist Conference Center at Bonnie Doone Plantation**

## **Deposit Policy**

All deposits are non-refundable.

25% of estimated cost is due within two weeks of booking to confirm reservation.

50% of estimated cost is due three (3) months prior to the event.

The balance is due Forty-five (45) days prior to the event.

## **Cancellation Policy**

All cancellations must be made in writing. Send cancellation notice by email to [vickiebreland@charlestonbaptist.net](mailto:vickiebreland@charlestonbaptist.net) If cancellation is made more than three (3) months prior to event, a full credit will be given toward future use.

If cancellation is made less than three (3) months prior to event, a credit will be given if another group books the facilities for the same time period. If cancellation is made less than three (3) months prior to the event and no other group books the facilities for the same time period, all deposits will be forfeited.

Note: All credits must be used within one year of originally scheduled event date.

## **Code of Conduct**

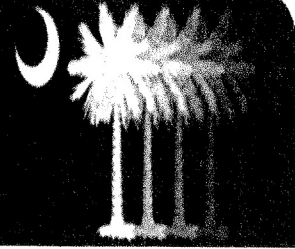
- Guests should refrain from wearing clothing that:
  - Is overly revealing or risqué in nature.
  - Depicts inappropriate or offensive messages, logos, slogans, or images.
- Use of alcoholic beverages or illegal drugs is prohibited.
- All conference center buildings are smoke-free environments. Smoking is permitted outside on the conference center grounds.
- Profanity or offensive language is prohibited.

Effective Winter 2016





Charleston Baptist Association  
*Charleston, South Carolina*



# CHILD/YOUTH PROTECTION POLICY

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## FORMS FOR CHURCHES

Edition Number: 001

(Edit 3/19/2013)

### MISSION STATEMENT

#### The Friends of Bonnie Doone

"But whoever causes the downfall of one of these little ones who believe in Me - it would be better for him if a heavy millstone were hung around his neck and he were drowned in the depths of the sea!" Matthew 18:6

#### Disclaimer

Adaptation of this policy without consent and consultation by the The Friends of Bonnie Doone child /Youth Protection Team is prohibited. Friends of Bonnie Doone does not assume any liability for reliance on these forms without consent and consultation.

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**Form 050 715 - STATEMENT OF COMPLIANCE (Church)**

The Adult Volunteers listed below are known to the staff or are recognized leaders of the participating church/organization and the church/organization knows of no reason why any should not serve as a sponsor for children and youth under the age of eighteen (18). The church/organization confirms that it has taken reasonable steps to verify that the individuals listed are not registered sex offenders by making inquiries to law enforcement officials or by checking [www.nsopr.gov](http://www.nsopr.gov) (the National Sex Offender Public Website). Participating church/organization warrants that it has taken appropriate steps to insure all adult sponsors are qualified and eligible to serve as sponsors for youth and children. \_\_\_\_\_ Company to perform nationwide criminal background checks on all Adult Sponsors. Participating church/organization warrants that ONLY the Adult Sponsors listed on this form are present.

**Names of all Adult Sponsors:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_

15. \_\_\_\_\_

Church Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
Authorized Representative Signature Printed Name Date

(\*A copy of church, organization's Child Protection Policy is required.)

Form - 051

716 - STATEMENT OF COMPLIANCE/ACKNOWLEDGEMENT OF  
FORMS RECEIPT (Churches)

I, the undersigned, will be participating in a Camp/Mission Retreat to \_\_\_\_\_  
\_\_\_\_\_ on or about \_\_\_\_\_, 20 \_\_\_\_\_  
\_\_\_\_\_, to \_\_\_\_\_.

I, representing \_\_\_\_\_ (Church, organization) am aware that mission related activities can be hazardous activities, and I am voluntarily participating in these activities with full knowledge of the danger involved and I hereby agree to accept any and all risks of injury or death.

As lawful consideration for being permitted by Charleston Baptist Association, (hereinafter "Released Parties"), to participate in mission related activities and use their facilities, I hereby agree that I, my heirs, distributees, guardians, legal representatives and assigns will not make a claim against, sue, attach the property of, or prosecute the Released Parties and/or any of their shareholders, officers, directors, agents, employees or other for injury or damage resulting from the negligence, acts or omissions howsoever caused, by any employee, agent, officer, director, shareholder, or other, as a result of my participation in mission related activities. In addition, I hereby release and discharge the Released Parties, their officers, shareholders, directors, employees, agents and others from all actions, claims, or demands I, my heirs, distributees, guardians, legal representatives, or assigns now have or may hereafter have for injury or damage resulting from my participation in mission related activities. Furthermore I agree to indemnify and hold the Released Parties harmless as to any claims, losses, settlements, judgments, costs and expenses (including attorney's fees) arising in any way from my participation in the activities described above.

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I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contractual agreement between me and the Released Parties and/or their affiliated entities and people, and I have signed it of my own free will.

I hereby certify that all adult sponsors have been screened, and are qualified and eligible to serve as adult volunteers with children. \_\_\_\_\_Initials

I further certify that appropriate insurance and applicable riders are in place to defend and indemnify child abuse and sexual misconduct claims, Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Group\_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

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Form - 051

716 - STATEMENT OF COMPLIANCE/ACKNOWLEDGEMENT OF  
FORMS RECEIPT (Churches)

Witness/Title/Contact Phone # : \_\_\_\_\_

Witness/Title/Contact Phone # : \_\_\_\_\_

717 - CODE OF CONDUCT (Churches)

While on the properties of Charleston Baptist Association as a Lessee, the following rules shall apply:

1. Using tobacco products in the presence of minors (under 18) is highly discouraged. All conference center buildings are smoke-free environments. Smoking is permitted outside on the conference center grounds.
2. Using, possessing, or being under the influence of alcohol, illegal, or illicit drugs will not be tolerated.
3. Possessing, distributing of obscene or pornographic materials will not be tolerated.
4. Using profanity in the presence of minors will not be tolerated.
5. Wearing clothing that is overly revealing and depicts inappropriate messages, logos, slogans, or images will not be allowed.
6. As a representative of \_\_\_\_\_ (Organization, Church etc), I understand that it is the Lessee's responsibility to take reasonable steps to verify that the Staff Members and Volunteers of my church and/or organization who provide care of minors (under the age of 18) have background checks and are not registered sex offenders.
7. Furthermore, a synopsis of the Friends of Bonnie Doone Child/Youth Protection Policy will be provided to Lessee. The lessee is required to read and sign the Charleston Baptist Association Child/Youth Protection Policy related to identifying, documenting and reporting child abuse.
8. All allegations of incidents involving improper touching, physical abuse, or sexual abuse which is not life threatening or has not caused visible bodily harm of a child or youth shall be brought to the attention of the Friends of Bonnie Doone.
9. If the incident is life threatening or has caused visible bodily harm of a child or youth, notify Law Enforcement immediately and the Friends of Bonnie Doone,

Authorized Representative Name \_\_\_\_\_

Authorized Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Contact Phone number (cell): \_\_\_\_\_