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ALL WORKGROUPS COMPLETE THIS PAGE



DATE: 10/23/13

CUPS WORKGROUP 30 DAY FORM

Complete this form online at least 30 days before your Work Week and submit the form to CUPS by clicking the Submit Form button at the bottom of the page. *Note - Work Group Name and Work Week cannot be changed on this form.*

Name of Work Group: Test Workgroup

Work Week (Beginning Sunday): 7/7/13

No. of volunteers in group: Adults: _____ Youth: _____ Children: _____

Form of Transportation: airline & van rental driving

Arrival in The Valley:

Date: _____ Time: _____ Location: _____

Flight # (if arriving by air): _____

Will group be lodging in The Valley Saturday night? Yes No

If so, where? _____

Cell phone number of group leader: _____

Cell phone number of another group member: _____

CUPS cell phone number is 956 605 8159. CUPS will meet you at your arrival time either at the airport or your chosen lodging to assist with transportation of luggage and any needed supplies, such as ice chests or coolers. If your flight or driving schedule changes please let CUPS know your new estimated time of arrival.

Departure from The Valley:

Date: _____ Time: _____ Location: _____

Flight # (if departing by air): _____

Will group be lodging in The Valley Friday night? Yes No

If so, where? _____

NOTE: *The RGV Work Group Checklist is due at this time. Two other forms are due at this time for Mexico. 1) La Quinta Condel Room List, and 2) Mexico Work Group Checklist. Each of these forms are available for printing or download from the CUPS web site home page (Document / Forms pull down menu). Instructions for submitting these forms are included on the forms themselves.*

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ONLY RGV (USA) WORKGROUPS COMPLETE THIS PAGE

DATE: 10/23/13 Work Group Name: Test Workgroup

Lodging

Where will you be staying?

El Instituto Camp Thicket Vali-Ho Other: _____

Which days? Sun Mon Tue Wed Thur

El Instituto

Payment: Upon arrival with check made out to SW Synod. You will receive key to facility at that time.
Cost: \$15 per volunteer per night and \$11 per volunteer in sleeping bag per night
Key: Leave it in facility in kitchen sink and lock door manually when you leave.
Linens and towels: Provided, but extra towels are recommended.

Camp Thicket

Payment: Upon arrival at park headquarters. You will receive key to facility and code for gate entrance.
Cost: \$15 per volunteer per night, \$11 per child per night, \$250 per day.
Key: Return it to park headquarters upon departure by 12 noon.
Linens and towels: Not provided, so be sure to bring bed linens or sleeping bag, pillow and towels, and extra towels if you plan to use swimming pool.

Vali-Ho Motel

Payment: By major credit card. To avoid paying hotel occupancy tax, you will need to provide the Church tax exempt form to the motel when paying. You can get copies from the Texas State Comptroller
<http://www.window.state.tx.us/taxinfo/taxforms/12-302.pdf>
Cost: \$15 per volunteer per night, \$11 per child per night, \$250 per day.

Supplies

If you need ice chests or coolers, please let CUPS know how many and what size you need.

- _____ Number of medium size ice chests
- _____ Number of large size ice chests
- _____ Number of water coolers

CUPS will deliver ice chests and coolers to your lodging location upon your arrival. Please clean and dry them out before returning them to CUPS upon your departure.

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ONLY MEXICO WORKGROUPS COMPLETE THIS PAGE

DATE: 10/23/13 Work Group Name: Test Workgroup

Lodging (\$36.00 per night). Recommend that payment be made on Sunday afternoon)

Pay as group yes no

If you plan to pay individually, please be aware that Hotel does not have the ability to make change therefore your payment should be exact, depending upon how many people are in your room. The room is \$36 per day for a total of \$180 for a 5 night stay.

Breakfast:

\$5.00 – Fruit, cereal, juice, coffee, or \$5.50 - Eggs prepared as you request plus ham, sausage or chorizo, and fruit, coffee & juice

Pay as group? Yes No Pay each morning or on Friday morning

Dinner: Monday through Wednesday meals will be eaten out at local restaurants. Meals may be eaten family style or selected from the restaurant’s menu. Normally, the schedule is *Sunday* – Quinta Condel (chicken and meat) *Monday* - Antiguas (chicken and meat), *Tuesday* - Cesar’s (chicken, meat or Mexican dished), *Wednesday* - El Mar (seafood) and *Thursday* – Quinta Condel (chicken and meat). Local restaurants cost per person may range from \$8.00 to \$12.00, depends upon what is ordered. Quintal Condel’s meal are \$7.50 per person.

If your group wishes to vary this schedule, please indicate where you wish to eat and on which night:

Sunday: _____ Monday: _____

Tuesday: _____ Wednesday: _____

NOTE: Antigua will do take out and it is fun to eat outside another night plus no need to drive into town, except for those who go pick up the food.

Dinner will normally be at 7:00 pm. Please be ready to depart at 6:45 pm on all days except Wednesday. Church is at 7:30 pm on Wednesday so dinner will be at 6:30 pm.

Dinner (please include 10% for tip) Pay as group? yes no.

If there are children in your group, please provide the following information:

Total number in group _____

Total number of children _____

For purposes of dinner payment only, please count each child under 12 as .5 adult and provide

Total number: (Adults + children x 0.5) _____

Hotel Tips (\$5.00 per person per room) Please multiply numbers of persons in your group by \$5.00 and give tip money **in \$1.00 bills to Louise by Wednesday.** (This is important. *Cannot tip hotel staff if funds arrive at last minute and in large bills. Suggest you bring tip money in \$1.00 bills x size of your group.*)

Coolers: Before leaving on Friday, please clean up all coolers, dry them out, and place them in Room 3. There are cleaning supplies and paper towels available.

4 ONLY MEXICO WORKGROUPS COMPLETE THIS PAGE

La Quinta Condel Room Listing

Date: 10/23/13

Work Group: Test Workgroup

Dates: _____

Room No.	Type	QUINTA CONDEL Names of Occupants	Number In Room
1	3 twins		
2	2 double	Reserved	
3	1 queen	Reserved for CUPS use	
4	2 double		
5	2 double		
6	2 double		
7	2 double		
8	2 double		
9	1 double/ 2 twin		
10	1 double/ 2 twin		
11	2 double		
12	2 double		
13	2 double		
14	2 double		
15	2 double		
16*	1 queen		
17*	1 queen		
18*	1 queen/ 1 twin		
19*	1 queen/ 1 twin		
20*	2 double		
21*	2 double		
22*	2 double		
23*	2 double		
24*	2 double		
25*	2 double		
26*	2 double		
27*	2 double		
28*	2 double		
29*	2 double		
30*	2 double		
31*	1 twin/1 double		
32	1 double		
33	1 twin/1 double		

*** Upstairs Rooms**

To Submit this Form (do one of the following):

- Preferred:** Submit online by clicking button at right
- Print the form, fill it in, mail it to Louse Flippin, CUPS, 100 E. Hackberry, #144 McAllen, Texas 78501