

2017

On Campus Reservations Request

For Office Use Only

Rcv'd Date: _____

Rcv'd Time: _____

Initials: _____

Res. No: _____

Family Name: _____

First Name: _____ Spouse Name: _____

Home Address: _____
(Number/Street/P.O. Box) City State Zip

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

NAMES OF FAMILY MEMBERS AND GUESTS:

Name	Date of Birth	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

RESERVATION REQUEST

ACCOMMODATIONS AND DATES DESIRED IN PREFERENCE ORDER

No. of Adults: _____ 1st Choice _____ from: _____ to: _____

No. of Children: _____ 2nd Choice _____ from: _____ to: _____

(13-17) _____ 3rd Choice _____ from: _____ to: _____

(6-12) _____ 4th Choice _____ from: _____ to: _____

(0-5) _____

Number of Rooms: _____

Room Type: Private Bath Shared Bath Cottage Handicap-Equipped Wheelchair-Accessible

You will be contacted, via email, by our reservations staff with the date and amount due for your future deposit

Membership Required

As a 501(C) (3) charitable, nonprofit and membership organization, a membership is necessary to either make a reservation or to purchase Program Packages. In addition to securing your reservation you will also receive informative newsletters and other mailings; as well as the ability to visit the campus throughout the year.

Annual Membership: \$60 Individual or \$120 Family