RESERVATION FORM

DATE OF VISIT: (MM/DD/YY) _____/_____/_____

CONTACT PERSON: _____ LEADER: _____

GRADE (IF SCHOOL): _____

SIZE OF GROUP (PLEASE INCLUDE CHAPERONES): _____

NAME OF SCHOOL/GROUP: _____

STREET ADDRESS: _____

CITY/STATE/ZIP CODE: _____

PHONE: _____

CELL PHONE: _____

EMAIL ADDRESS: _____

WHAT IS GROUP CURRENTLY STUDYING? _____

_____

SERVICE REQUESTED: _____

HOW LONG CAN THE GROUP STAY AT THE PARK? _____

ARRIVAL TIME: _____

PLEASE NOTE: THE PARK IS IN EASTERN TIME ZONE

NOTES:

RECEIVED BY: _____ DATE: _____