

Garden State Ski Club

Vermont Lodge Reservation Request Form

Name:	Name (for couples room or Guest)
E-Mail address:	Home Phone: _____ Cell Phone: _____ Work Phone: _____

Reservation choice:

(Indicate choice with "X")

Check in date:

Check out date:

_____ **Member \$30 PP per night**

____/____/____

____/____/____

_____ **Guest \$35 PP per night**

____/____/____

____/____/____

**Friday or Saturday night (1 night only) Available ONLY if reservation will not displace a full weekend reservation*

**A CHECK FOR FULL PAYMENT MUST ACCOMPANY RESERVATION FORM
PLEASE FILL OUT ONE RESERVATION REQUEST FOR EACH RESERVATION BEING MADE**

**IF YOUR RESERVATION INCLUDES A GUEST, YOU MUST ALSO COMPLETE A
GUEST INFORMATION SHEET AND IT MUST BE ATTACHED TO THIS
RESERVATION REQUEST FORM**

**ALL RESERVATIONS ARE SUBJECT TO CURRENT LODGE POLICIES FOR
RESERVATIONS, SHAREHOLDERS AND CANCELLATIONS**

ALL MEMBERS USING THE LODGE MUST READ AND FOLLOW CURRENT LODGE RULES

Name (print): _____ Signature: _____ Date: _____

Name (print): _____ Signature: _____ Date: _____

Office Use Only

Check#: _____ **Amount:** _____ **Date Rec'd:** _____