

Confirmation of Reservation

Date _____

Reservation For _____

Number of Persons:

Address _____

Adults _____

City _____ State _____ Zip _____

Children _____

Date of Arrival _____ Time _____

A.M.
P.M.

Of Pets _____

Departure Date _____

**NUMBER
NITES**

Unit
Size _____

Rate \$ _____

With Without Electric

With Without Sewer Hook-Up

**IF YOU HAVE ANY SPECIAL
NEEDS, OR NEED ASSISTANCE,
PLEASE NOTIFY THE OFFICE.**

Space Reserved

Deposit \$ _____ Signed _____

From

Company Name

Address

City State Zip

(000) 000-0000

To _____
SAMPLE FORM

REPRODUCTION PROHIBITED

