

New Year Holiday 2017-2018

Reserve for: _____ Phone: _____

This Reservation is for: Member

For add'l Room, list Sponsoring Member: _____ Phone: _____

(select from dropdown: Member, Add'l room)

Room Preferences: _____ (in priority order)

CHILDREN			
Age:			
Gender (M or F):			
Dorm (Y or N):			

Arrival Date: _____ Departure Date: _____

1st Half Priority Number			Fees		Dates					Total #	Charges (Fees * Total #)
			Member	Add'l Room	Fri 12/22	Sat 12/23	Sun 12/24	Mon 12/25	Tue 12/26		
Room Charges	Adults	> 20	\$ -	\$ 20.00							
	Teen	13 - 20	\$ -	\$ 6.00							
	In Room Child	4 - 12	\$ -	\$ -							
	Young Child	< 4	\$ -	\$ -							
Meal Charges	Breakfast	4+	\$ 5.00	\$ 5.00							
	Breakfast (Not Taken)	4+	\$ 2.00	\$ 2.00							
	Dinner	14+	\$ 10.00	\$ 10.00							
	Dinner	4 - 13	\$ 5.00	\$ 5.00							
	Dinner (Not Taken)	4+	\$ 5.00	\$ 5.00							

2nd Half Priority Number			Fees		Dates					Total #	Charges (Fees * Total #)
			Member	Add'l Room	Wed 12/27	Thu 12/28	Fri 12/29	Sat 12/30	Sun 12/31		
Room Charges	Adults	> 20	\$ -	\$ 20.00							
	Teen	13 - 20	\$ -	\$ 6.00							
	In Room Child	4 - 12	\$ -	\$ -							
	Young Child	< 4	\$ -	\$ -							
Meal Charges	Breakfast	4+	\$ 5.00	\$ 5.00							
	Breakfast (Not Taken)	4+	\$ 2.00	\$ 2.00							
	Dinner	14+	\$ 10.00	\$ 10.00							
	Dinner	4 - 13	\$ 5.00	\$ 5.00							
	Dinner (Not Taken)	4+	\$ 5.00	\$ 5.00							

Member Signature: _____
(to be signed at lodge)

Total Room and Meal Charges

Date: _____

Less: Bar Food Reimbursement

Collected by: _____

Net Amount Due

Host: Send all signed forms and check to the Treasurer - Dan Connell, 64 Robbins Road, Arlington, MA 02476

or
Cancellation Fee
(\$10 Per Adult per Weekend)

PLEASE RE-NAME THIS FILE WITH YOUR NAME AND RESERVATION DATE BEFORE EMAILING TO THE HOST!
(e.g. "[Your name] [Reservation date] Res Form" or "Smith 01 15 18 Res Form")