



**GROUP RESERVATION FORM**  
**DUE: MARCH 30TH**

Contact Person Information

Name: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

Church Information

Church Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Payment Schedule

List by name and gender - \$50 per person due by April 30th  
Final list by name and gender and payment in full due by June 15th

Number of slots to be reserved (your best guess on a tentative number)  
Places are reserved on a first come first served basis.

Teens: \_\_\_\_\_ @ \$320

Adults: \_\_\_\_\_ @ please see program detail sheet for costs for adults

Comments:

---

---

---

---