SNOWY RANGE SKI AREA
GROUP RESERVATION
FAX 307-745-4113
(Please TYPE or PRINT clearly)

GROUP NAME _____

BEGIN SKI DATE _____ END SKI DATE _____

YOUR FAX NUMBER _____ YOUR EMAIL _____

GROUP LEADER _____ H-PHONE _____

W-PHONE _____

2ND CONTACT PERSON _____ H-PHONE _____

W-PHONE _____

RESERVATIONS MUST BE MADE **72 HOURS** PRIOR TO ARRIVAL. COMPLETE ALL INFORMATION ACCURATELY/COMPLETELY. INCOMPLETE DATA WILL CAUSE A DELAY.

NAME First/Last	WT	HT	AGE	SHOE SIZE	SKIER TYPE	SKI ?	SNOWBRD FT FWD ?

NAME First/Last	WT	HT	AGE	SHOE SIZE	SKIER TYPE	SKI ?	SNOWBRD FT FWD ?