

# RESERVATION REQUEST

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ # IN PARTY \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ DEPARTURE DATE \_\_\_\_\_

**ACCOMMODATIONS:**

PLEASE INDICATE DESIRED LAKE

UPPER FRYPAN \_\_\_\_\_ KROOKED \_\_\_\_\_

ENTWINE \_\_\_\_\_

DATE: \_\_\_\_\_

**RESERVATIONS REQUIRE A DEPOSIT OF \$150 PER/  
PERSON. ALL DEPOSITS ARE NON-REFUNDABLE.**