Group Name: _____

Group Leader: _____

***All Alternate Activities require liability release**

***If tubing, please make note of time.**

	Name	Ticket Needs:	# of Days	Ticket Type	Rate	Rentals:	Ski Rental Pkg	SB Rental Pkg.	Helmet Rental	Lessons:	AM Group Lesson	Lift,Lesson &Rental Pkg.	First Time Ski Package	First Time SB Pkg.	Advanced Ski Pkg	Advanced SB Pkg.	Alternate Activities:	Day Tubing	Night Tubing	Ice Skate	Ice Skate w/rentals	Climbing Wall	XC Ski	XC Ski w/rentals	Adv.Ctr. Pkg	Lunch Vouchers:	$10 for $12	Notes:
1	Joe Smith		1	AD	$51		x		x					x				x			x						x	Day Tubing at 2pm
2	Ed Smith		2	JR	$39				x													x					x	
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