



# R-WILD HORSE RANCH

## GROUP RESERVATIONS

OWNER NAME: \_\_\_\_\_

OWNER NUMBER: \_\_\_\_\_

CHECKING IN \_\_\_\_\_ CHECKING OUT \_\_\_\_\_

NUMBER OF GUEST CABINS NEEDED: \_\_\_\_\_ NUMBER OF GUEST ATV \_\_\_\_\_

NUMBER OF GUEST MOTELS NEEDED: \_\_\_\_\_

NUMBER OF GUESTS:

AGE 0-11 \_\_\_\_\_

AGE 12-20 \_\_\_\_\_

AGE 21-64 \_\_\_\_\_

AGE 65+ \_\_\_\_\_

NUMBER OF OWNERS: \_\_\_\_\_ SITE \_\_\_\_\_

NUMBER OF ASSOCIATES: \_\_\_\_\_ SITE \_\_\_\_\_

UPPER LODGE KITCHEN(\$150.00/DAY):

YES: \_\_\_\_\_ NO: \_\_\_\_\_

DATES NEEDED: \_\_\_\_\_ TO \_\_\_\_\_

PHONE # \_\_\_\_\_

EMAIL \_\_\_\_\_

### OFFICE USE ONLY:

DEPOSIT AMOUNT \_\_\_\_\_

DATE PAID \_\_\_\_\_

FINAL PAYMENT \_\_\_\_\_

DATE PAID \_\_\_\_\_

NOTES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Cabin # Requests**

**Hotel # Requests**

**I understand that 50% of my total group cost will be due at the time of reservation, with the remainder due 3 days prior to arrival. After that date the reservation is finalized and no changes or refunds will be authorized. Additionally, I understand that all payments must be made by the owner only.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

# GROUP RESERVATION MANIFEST

|    | GUEST NAME | AGE | ARRIVAL | DEPARTURE | SITE REQUESTED |
|----|------------|-----|---------|-----------|----------------|
| 1  |            |     |         |           |                |
| 2  |            |     |         |           |                |
| 3  |            |     |         |           |                |
| 4  |            |     |         |           |                |
| 5  |            |     |         |           |                |
| 6  |            |     |         |           |                |
| 7  |            |     |         |           |                |
| 8  |            |     |         |           |                |
| 9  |            |     |         |           |                |
| 10 |            |     |         |           |                |
| 11 |            |     |         |           |                |
| 12 |            |     |         |           |                |
| 13 |            |     |         |           |                |
| 14 |            |     |         |           |                |
| 15 |            |     |         |           |                |
| 16 |            |     |         |           |                |
| 17 |            |     |         |           |                |
| 18 |            |     |         |           |                |
| 19 |            |     |         |           |                |
| 20 |            |     |         |           |                |

OWNER NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

OWNER # \_\_\_\_\_