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:	Intro to Ski	Intro To SB	Adv. Ski Pkg.	Adv. SB Pkg.	AM Lesson	PM Lesson	*Alternate Activities*:	Day Tubing Reservations Required	Night Tubing Reservations Required	Zipline Reservation Required	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	$61		x		x						x			x				x						x	Day Tubing at 2pm
2	Ed Smith		2	JR	$45				x			x											x					x	
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