



OC SKI CLUB TRIP SIGN UP SHEET

Trip: Bolton Valley, VT
March 18 – 21, 2025

Attendee
Number:

COST: \$335+/- options
PLEASE PRINT ALL INFORMATION CLEARLY

First Name: _____ Middle Initial _____ Last Name _____
 Address: _____
 City: _____ State _____ Zip: _____
 Telephone: Home: _____ Work: _____ Cell: _____
 Email Address: _____
 In Case Of Emergency Notify:
 Name: _____ Relationship: _____ Telephone No.: _____

I have a roommate(s) (Print Name(s) Clearly): 2. _____
 3. _____ 4. _____

Assign me a Roommate preference (not guaranteed): Male Female Non-Smoker Do Not Care

I do not want a roommate – I will pay the single supplement + \$255

NOTE: Please circle the days you are buying Lift tickets for

LIFT TICKET Options: No Skiing _____ days * \$39 = \$\$ _____ Tuesday, Wednesday, Thursday, Friday

Rooming Preference (not guaranteed): **ALL Rooms are DOUBLE OCCUPANCY unless a single supplement is paid**

I prefer 1 Bed 2 Beds

I am interested in the Snowshoe tour - Thursday 1:30pm I will use my own snowshoes

Signature: _____ **Date:** _____

Travel Insurance – We recommend that you investigate travel insurance protection. The cost varies depending the type of travel insurance you purchase. It is usually about 5 – 7 % of the total trip cost. Please read the coverage carefully, the agreement is between you and the travel insurance you purchase.

**** For Trip Leader use only *****

2024/25 Membership Number:

Option	Price
Standard Package - Dbl	\$335
Single	+ \$255
Triple	- \$85
Quad	- \$125
Lift Tickets \$39 x _____	+ \$
Penthouse	+ \$120
Total Package	

Payments:	Amount	Check # or Cash or PP	Date	Rec'd By
Package Price w/adjustments				
Deposit)				
Adjustments (comp)				
Additional payments:				
Balance Due				
Final Payment				
Balance				