



OC SKI CLUB TRIP SIGN UP SHEET Number _____

Indian Head Resort New Hampshire

March 24– 27, 2025

PLEASE PRINT ALL INFORMATION CLEARLY

First Name: _____ Middle Initial _____ Last Name _____

Address: _____ Date of Birth: ____/____/____ Male / Female

City: _____ State _____ Zip: _____

Telephone: Home: _____ Work: _____ Cell: _____

Email Address: _____

In Case of Emergency Notify:

Name: _____ Relationship: _____ Telephone No.: _____

[] I have a roommate (Print Name Clearly): (2) _____

(3) _____

(4) _____

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

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

By signing below, you agree to the Club Terms and Conditions Policy

Signature: _____

Travel Insurance – We recommend that you investigate travel insurance protection. The cost varies depending on 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 provider you purchase from.

All trips are sold as a package as described, with limited options

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

Membership Status 2025 – 2026: [] Membership Verified

Membership Number

Guest:

Payment Information

Option	Price
Standard Package	
Single Occupancy	\$552
Double Occupancy	\$402
Triple Occupancy	\$350
Quad Occupancy	\$324
Guest Fee (\$5 per day)	
OC Comps	
Total Cost	

Payments:	Amount	Check # or Cash	Date	Rec'd By
Initial Deposit (\$200)				
:				
Balance				
+				
Comps				
Final Payment				
Balance				