

Please mail or fax with your **\$150.00** deposit.

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GROUP NAME: \_\_\_\_\_  
COORDINATORS NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
VISIT DATE: \_\_\_\_\_ ARRIVAL TIME: \_\_\_\_\_ # OF PARTICIPANTS: \_\_\_\_\_  
PAYMENT METHOD: CASH CREDIT CHECK # \_\_\_\_\_ Amount \$ \_\_\_\_\_  
CARD TYPE: VISA MASTERCARD DISCOVER  
CARD # \_\_\_\_\_ EXP. DATE: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

MAIL TO: WHITETAIL RESORT  
ATTN: GROUP SALES  
13805 BLAIRS VALLEY ROAD  
MERCERSBURG, PA 17236