

# SCOUT AND YOUTH GROUP REGISTRATION

Deposit is \$100 to hold your reservation. Complete this form and mail it in with a check or use your credit card and fax it to us.

3581 W. Pines Rd., Oregon, IL 61061 Fax 815-732-7924 Phone 815-732-7923

GROUP LEADER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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

EMAIL \_\_\_\_\_

TROOP # OR GROUP NAME \_\_\_\_\_ COUNCIL NAME \_\_\_\_\_

# OF CHILDREN \_\_\_\_\_ # OF ADULTS \_\_\_\_\_ AGE RANGE OF CHILDREN \_\_\_\_\_

Where did you hear about the ranch? \_\_\_\_\_

How many times has your group visited the ranch? \_\_\_\_\_

DATES: (please supply 2 choices, we can't guarantee your first choice)

1st choice \_\_\_\_\_

2nd choice \_\_\_\_\_

### Credit Card Information

VISA     MASTERCARD     DISCOVER

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_ Security Code \_\_\_\_ (Required)  
(3 digit code on the back of your card)

Cardholder's Name (PRINT) \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

( Cancellation must be made 90 days prior to date of arrival for refund)