



Retreat **Application Form**

Contact Person's Name: _____

Contact Person's Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone: _____ Home Telephone: _____

Fax: _____ E-mail: _____

Name of Group or Organization: _____

Nature of Meeting or Retreat: _____

Total Number of Reservations for the Group: _____ Approximate Ages: _____

Number of Males: _____ Number of Females: _____

Please provide a list of attendees with gender and age specified.

Type of Accommodations Requested (Please circle one):

_____ Lodge* _____ Cedar Crest Hotel** _____ Voight**

Meals Prepared by Eagle Eyrie (Circle One): YES NO

If yes, meals Desired: _____

***Linens Provided by Eagle Eyrie (Circle One):** YES NO

**Linens are provided in the Hotel and the Voight Conference Center.

Additional Needs: _____

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Other Special Needs

Items Available Upon Request (ask for prices):

Swimming Pool *
Recreational Equipment
Audio-visual equipment
Breaks, Receptions, banquets
Firewood
Information About Off-campus Attractions

Any Other Special Requests: _____

*The swimming pool is available by pre-arrangement in the summertime only. Eagle Eyrie provides lifeguards at additional fees depending on the size of the group and hours of use.

Date Desired

1st Choice: Arrival Date: _____

Departure Date: _____

2nd Choice: Arrival Date: _____

Departure Date: _____

3rd Choice: Arrival Date: _____

Departure Date: _____

Estimated Time of Arrival: _____ (am/pm)

Estimated Time of Departure: _____ (am/pm)

Deposit and Mailing Instructions

Deposit Amount Due: \$ _____ (based on verbal instructions)

☐ Check Enclosed (make payable to Eagle Eyrie)

☐ Charge To (Circle One): VISA / MasterCard / Discover

Card #: _____ Expiration Date: _____

Name on Card: _____

Signature (Required): _____

Form and payment may be mailed, faxed or emailed. Deposit must be received in order to secure reservations.