



2010 CAMPSITE RESERVATION FORM

Contact: _____ Phone: () _____

Group Booking: Yes No _____ Fax: () _____

Group Name: _____ Email: _____

Address: _____ City: _____

Prov/State: _____ Postal Code: _____

Arrival Date: _____ # of Nights: _____ Preferred Site, if available Site # _____

Campsite Services and Rates

- 50 % pre-payment or credit card guarantee required at time of booking. Full payment will be processed if cancellation is received less than 48 hours prior to the arrival date.

Site Rental	# of Sites	# of Nights	Rate	Total
Campsite without hookup	_____	_____	X \$ 10.00 =	\$ _____
Rate per night, per site	_____	_____		
Campsite with electrical hookup	_____	_____	X \$ 15.00 =	\$ _____
Rate per night, per site	_____	_____		
Kekuli, Teepee, Miner's Tent	# of Tents	# of Nights		
Miner's Tent - Rate per night, per tent	_____	_____	X \$ 35.00	\$ _____
Teepee - Rate per night	_____	_____	X \$ 45.00	\$ _____
Kekuli - Rate per night	_____	_____	X \$ 100.00	\$ _____
Cabin Rental * subject to 8 % Room Tax	# of People	# of Nights		
With private bathroom (sleeps 6)	_____	_____	X \$ 85.00	\$ _____
Without private bathroom (sleeps 8)	_____	_____	X \$ 65.00	\$ _____
Extra persons, per person	_____	_____	X \$ 5.00	\$ _____
8 % Room Tax on Cabin Rental including Extra Persons			X 8 %	\$ _____
Bedding Rental	# of People	# of Nights		
Sheets, pillow, light quilt & towel	_____	_____	X \$ 4.00	\$ _____
Site Admission – Day	# of Visitors	# of Nights		
Group Rate – Minimum 10+	_____	_____	X \$ 8.00 =	\$ _____
Adult	_____	_____	X \$ 9.00 =	\$ _____
Child (6-12 years)	_____	_____	X \$ 6.00 =	\$ _____
Senior (55 +)	_____	_____	X \$ 8.00 =	\$ _____
Family (up to 2 adults & 3 children)	_____	_____	X \$ 20.00 =	\$ _____
			Subtotal	\$ _____
Payment Method: <input type="checkbox"/> Cheque to be mailed			GST 5%	\$ _____
<input type="checkbox"/> Credit Card – full payment to be processed in advance			Total	\$ _____
<input type="checkbox"/> Credit Card – for 50 % advance deposit, balance due upon arrival				

Signature: _____ Print Name: _____

Date: _____ Credit Card #: _____ Exp: _____

Payment required: Cheque or Credit Card Credit Card: Visa Mastercard

**Historic Hat Creek Ranch * Junction of Highways 97 & 99, 11 km north of Cache Creek * PO Box 878 *
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