

## Skylake Yosemite Camp ~ 2024 Family Camp ~ Enrollment Application

Reservation Name: \_\_\_\_\_

Check one: Weekend A \_\_\_ Weekend B \_\_\_ Weekend C \_\_\_ Weekend D \_\_\_

Weekend A ~ check in: Friday 5/24 - check out: Monday 5/27 (Memorial Day Weekend)

Weekend B ~ check in: Thursday 5/30 check out: Sunday 6/2

Weekend C ~ check in: Thursday 8/15 – check out: Sunday 8/18

Weekend D ~ check in: Thursday 8/22 – check out: Sunday 8/25

\*First meal served is breakfast the morning after check-in. Last meal served is lunch on check out day. (8 meals total)

### **Cost and Number of Guests:**

Adults/Teens (Age 13+) : \$450 # Number of Adult/Teen guests: \_\_\_\_\_

Children (ages 5-12) : \$195 # Number of Children guests: \_\_\_\_\_

Toddlers/Babies (4 and under) : Free # Number of Toddler/Baby guests: \_\_\_\_\_

**Total Cost for 2024:** \_\_\_\_\_

### **Names of Guests: (If a guest is under 18, please provide their date of birth)**

Guest 1	Name:	DoB:	Guest 5	Name:	DoB:
Guest 2	Name:	DoB:	Guest 6	Name:	DoB:
Guest 3	Name:	DoB:	Guest 7	Name:	DoB:
Guest 4	Name:	DoB:	Guest 8	Name:	DoB:

### **Contact Details**

**\*Address (Street, City, State, Zip):**

**\*Phone:**

**\*Email:**

### **Payment Details**

Name as it appears on your credit card:

Card#: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Code: \_\_\_\_\_

Address the card is registered to: (if different than above)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

*I authorize a \$300 deposit to be taken from this card upon receipt of this application, with the remaining balance to be charged on March 1, 2024 for Weekend A or B or May 1, 2024 for Weekend C or D.*

**\*\**(One Application Form and Deposit required per cabin reserved. One person responsible for payment per cabin, we cannot split cabin charges.)\*\****

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*Your Reservation is not confirmed until you receive a confirmation notice, please let us know if you don't receive the conformation email.\*\***

**Please return this form to Skylake via email, or call us to register by phone!**

[Paul@skylake.com](mailto:Paul@skylake.com)

**Phone: 559-642-3720**

\*Cancellations more than 60 days before the start of Family Camp will receive a full refund less a \$100 cancelation fee

\*Cancelations less than 60 days before the start of the Family Camp will receive a 50% Refund

\*Please note the minimum charge per cabin is \$900.