

River Valley Snow Tube

GROUP RESERVATION FORM

Please print and ensure all information is accurate and complete.
Once completed, fax or email your contact information.

CONTACT INFORMATION

Name of Group/School _____

Contact Person: _____

Phone: _____

Evening Phone: _____

Fax: _____

Address: _____ City _____ Postal Code _____

Email: _____

School Social Birthday

ARRIVAL INFORMATION

Arrival Time: _____ Departure Time: _____

Arrival Date: 1st choice: _____

Arrival Date: 2nd choice: _____

Number of persons: _____

How many hours of tubing are you interested in:

2 hours 3 hours 4 hours

*Please note weekend afternoon arrivals for Social & Birthday groups are limited and subject to availability. Morning and evening requests are encouraged.

NOTES

Any additional information:

Contact us at: 519 225 2329 or 1 800 795 9405

Fax us at: 519 225 2319

Email us at: vtkaczuk@execulink.com

Mailing address: 4725 Elginfield Rd., RR#3 St. Marys Ontario, N4X 1C6