

YOUTH/SCHOOL GROUP ORDER FORM (M, TH, or F)

Please confirm availability of your requested date by contacting Group Sales. To assist with proper staffing for your Group, please return ALL requested information at least 14 days PRIOR to your trip date.

Please email all requested forms to: jan.bruder@pyramidglobal.com

Lessons are booked separately, please specify if you need lessons and we will be able to help. Lessons are required if students are beginner skiers.

Group Name_____

A group consists of 20 or more persons <u>purchasing</u> 20 or more lift tickets; ages 9-17.

Address	City	State	Zip
Group Lea	der (req'd)	Phone	Email
	Backup Lea	ider (req'd)	Phone
Email		Trip date	Expected time of
arrival			
906-774-2747 -	Jan Bruder for date - jan.bruder@pyra	midglobal.com	
No food and beverage carry ins are allowed. I	, ,	oup brings food and b	<u> </u>
eating outdoors, on the bus or in their personal			please initial
This rate is for our group and is not to be offer	ed outside of 'Gro	<mark>up Name' listed abov</mark>	eplease initial
Group Leader Signature		Date	