

# SoloSports Adventure Holidays at Punta San Carlos, Baja California

24145 Minnetonka Lane, Lake Forest CA 92630 Telephone 949.289.7779 baja@solosports.net www.solosports.net

## GUEST RESERVATION SURVEY

This is an electronic form that should be filled out in acrobat reader and e-mailed to baja@solosports.net

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State (2 letter code) \_\_\_\_\_ Zip Code \_\_\_\_\_ Country (required for travel) \_\_\_\_\_

Date of Birth (required for travel) \_\_\_\_\_ Country of Passport or ID \_\_\_\_\_  
mm/dd/yyyy

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail (important) \_\_\_\_\_ Referred by \_\_\_\_\_

Trip Start Date \_\_\_\_\_ Trip End Date \_\_\_\_\_ Group Name \_\_\_\_\_

Special Dietary/Medical concerns \_\_\_\_\_

Sailing Ability \_\_\_\_\_ Wavesailing Ability \_\_\_\_\_

Kiting Ability \_\_\_\_\_ Mt. Biking Ability \_\_\_\_\_

Demo Gear Option Ht \_\_\_\_\_ Wt \_\_\_\_\_ Special Conditions \_\_\_\_\_

### ADVENTURE HOLIDAY COSTS

8-day Fly-in package \$ 2,600 (per person) = \$ \_\_\_\_\_

additional week \$ 1,950 (per week) = \$ \_\_\_\_\_

Self Arrive Package \$ 300 (per day) = \$ \_\_\_\_\_

Special Event fee \$ 300 (per person) = \$ \_\_\_\_\_

Matt Pritchard Wavecamp \$ 400 (per person) = \$ \_\_\_\_\_

Demo Gear Insurance (\$20 per \$100 damage) = \$ \_\_\_\_\_

Gift Card Option *for Ticket to Ride, gear or gratuities* = \$ \_\_\_\_\_

Gift Card Option *for purchases at the campo Campstore* = \$ \_\_\_\_\_

Subtotal = \$ \_\_\_\_\_

Adjustment = \$ \_\_\_\_\_

Total Due = \$ \_\_\_\_\_

#### **IMPORTANT -**

Full payment is due at time of booking.  
Your e-mail address is required to receive  
important travel information.

### PAYMENT INFO

Name (as it appears on card) \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (at billing address) \_\_\_\_\_ Alternate # \_\_\_\_\_

Credit Card Type \_\_\_\_\_ CC # \_\_\_\_\_

Exp. Date \_\_\_\_\_ Security # (3 or 4 digit number) \_\_\_\_\_ Country of Billing Address \_\_\_\_\_