

SoloSports Adventure Holidays at Punta San Carlos, Baja Mexico

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GUEST RESERVATION SURVEY

The form should be printed out and FAXed or mailed. Please fill out a reservation form for each person. FAX to 949.837.1396

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 # _____ Trip Date _____ Group Name _____

Special Dietary/Medical concerns _____

Sailing Ability _____ Wave sailing Ability _____

Kiting Ability _____ Mt. Biking Ability _____

Demo Gear Option _____ Height _____ Weight _____ Special Conditions _____

ADVENTURE HOLIDAY COSTS

8-day Fly-in package \$2,250 (per person) = \$ _____

Demo Gear Option (Kite or Windsurf) \$ 300 (per person) = \$ _____

Demo Gear Option (Santa Cruz Bike) \$ 300 (per person) = \$ _____

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

Total Extra days _____ \$ 200 (per day) = \$ _____

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

Gift Card Option *prepaid credit that can be used to purchase a "Ticket to Ride" or for purchases at the campo Campstore or Gear Room* = \$ _____

IMPORTANT -
If FAXing - please confirm your information to ensure receiving your travel documents. Your e-mail address is used to deliver important information.

a minimum deposit of 50% is due with remaining balance due 30 days prior to departure

Total Due = \$ _____

Deposit = \$ _____

Balance Due = \$ _____

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 _____