

# Sugar Creek Parks and Recreation

## OVERNIGHT TRIP REGISTRATION FORM

Trip Destination: \_\_\_\_\_ Date(s): \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ St.: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Roommates Name: \_\_\_\_\_

Roommates Name: \_\_\_\_\_

Roommates Name: \_\_\_\_\_

Room Preference Smoking: \_\_\_\_\_ Non smoking: \_\_\_\_\_

Do you require a Handicap room Yes: \_\_\_\_\_ No: \_\_\_\_\_

Single: \_\_\_\_\_ Double: \_\_\_\_\_ Triple: \_\_\_\_\_ Quad: \_\_\_\_\_

Deposit of (\$50.00) Non refundable 72 Hours before trip schedule

Balance Due (30 Days prior to departure date)

### **Cancellation Policy**

Sugar Creek Parks and Recreation offers full refunds until the final payment date for most tours. Following final payment, recoverable charges will be refunded. Certain penalties and restrictions may apply for specific tours.

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

Return form to:  
Sugar Creek Parks and Recreation Department  
103 S. Sterling  
Sugar Creek, Missouri 64054  
Attn: Connie Halastik