

# MILFORD HOUSE 2018 REQUEST FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City/Town \_\_\_\_\_ State/Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

PHONE: Home \_\_\_\_\_ Work \_\_\_\_\_ email: \_\_\_\_\_

# of Adults: \_\_\_\_ # of kids 12 & under: \_\_\_\_ AGES at time of stay: \_\_\_\_\_ PETS (Dog) \_\_\_\_ (Cat) \_\_\_\_

MAP – With the meal plan \_\_\_\_\_ or ALC - Some Meals \_\_\_\_\_ NO Meals \_\_\_\_\_

## DATES PREFERRED:

1 Arrivoal: \_\_\_\_\_ Departure: \_\_\_\_\_ # of Nights \_\_\_\_\_

2 Arrivoal: \_\_\_\_\_ Departure: \_\_\_\_\_ # of Nights \_\_\_\_\_

3 Arrivoal: \_\_\_\_\_ Departure: \_\_\_\_\_ # of Nights \_\_\_\_\_

## CABIN PREFERRED:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Special Requests or Allergies the Staff should know about? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*If you stay in the same cabin at the same time each year you will have priority for that cabin, if your someone changing to a new cabin or don't have priority I will try to fit you in the best I can.*

***NOTE – IF YOU HAVEN'T HEARD FROM ME BY END OF JANUARY PLEASE EMAIL [reservations@milfordhouse.ca](mailto:reservations@milfordhouse.ca) to make sure I have your information.***