

# MILFORD HOUSE 2024 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. \_\_\_\_\_

*If you stay in the same cabin at the same time for two years, you will gain seniority for that cabin on the third year. If you are someone changing to a new cabin or don't have seniority we will try to fit you in the best we can.*

*This form has to be received by November 30<sup>th</sup> NOTE – IF YOU HAVEN'T HEARD FROM US BY END OF JANUARY PLEASE EMAIL [reservations@milfordhouse.ca](mailto:reservations@milfordhouse.ca) to make sure I have your form.*