CANYON RANCH WINTER WEEKEND SPA-AWAY

WITH ALISON VARDARO

January 29 – 31, 2016 Lenox, MA



	CONTACT INFO	rmation
NAME:		
ADDRESS:		
E-MAIL:		
TELEPHONE NUMBER:		CELL:
EMERGENCY CONTACT NUMBER:		
Cost \$1,340.00 per person based on double oc Place Holder Fee \$50.00 – with signed registrati Deposit \$700.00 due on or before November 2: Balance (including charges for additional service	on form 5, 2015	dividually upon check-out.
ACCOMMODATION INFORMATION		Credit Card Information
I WILL SHARE A ROOM WITH:		☐ MASTERCARD ☐ VISA ☐ OTHER:
I AM INTERESTED IN PAIRING UP WITH A ROOMMATE:	[(check box)	CARD NUMBER:
I WOULD LIKE A SINGLE ROOM: \$360.00 single supplement	(check box)	EXP DATE: SEC CODE:
I AM INTERESTED IN RESERVING ADDITIONAL PRE OR POS	ST-NIGHTS: (#of nights/dates)	NAME ON CARD:(please print) BILLING ADDRESS:
		SIGNATURE: -
Payments may be made by personal check of authorization section. Credit card payments for the CHECKS SHOULD BE MADE OUT TO FORKS ON Forks on the Road/Connie Walsh 92 Milton St. Boston, MA 02124	or place-holding fees a	·
	CANCELLATIO	N POLICY
\$50.00 place-holding fee non-refundable. \$700.00 deposit is fully refundable up to Canyon Ranch stay for one year; 0-7 days	30 days before arriva	l; 8-29 days, non-refundable but applicable to any
I UNDERSTAND AND AGREE TO THE ABOVE.		
SIGNATURE:		DATE: