

Youth Tour Reservation Form

To request a youth tour please complete and submit this form .
Reservations are not required for self-guided tours.

This request does not confirm your tour.
You will be contacted by Group Tour Reservations who will confirm your tour.
Thank You!

Your Name _____

Organization Name: _____

Group Name: _____

Phone Number: _____

Address: _____

City: _____ State _____ Zip _____

Email: _____

Choice #1

Day: Tues. Wed. Thurs Month: _____ Date: _____ Time: 10 am 11:30 am 2:30 pm

Choice #2

Day: Tues. Wed. Thurs Month: _____ Date: _____ Time: 10 am 11:30 am 2:30 pm

Group Size: _____

Will arrive by: Bus Large Van (How many _____) Cars (How many _____)

Special considerations and comments:

Please mail to: Lakewold Gardens Attn: Pam Felts, PO Box 39780, Lakewood, WA 98496