

SoloSports Adventure Holidays at Punta San Carlos, Baja Mexico

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GUEST RESERVATION SURVEY

This is an electronic form that should be filled out in acrobat reader and e-mailed to baja@solosports.net

First Name _____ Last Name _____

Address _____ City _____

State (2 letter code) _____ Zip Code _____ Country (required for travel) _____

Date of Birth (required for travel) _____ Country of Passport or ID _____
mm/dd/yyyy

Home Phone _____ Work Phone _____ Cell Phone _____

E-Mail (important) _____ Referred by _____

Trip Start Date _____ Trip End Date _____ Group Name _____

Special Dietary/Medical concerns _____

Sailing Ability _____ Wavesailing Ability _____

Kiting Ability _____ Mt. Biking Ability _____

Demo Gear Option Ht _____ Wt _____ Special Conditions _____

ADVENTURE HOLIDAY COSTS

8-day Fly-in package \$ 2,600 (per person) = \$ _____

additional week \$ 1,950 (per week) = \$ _____

Self Arrive Package \$ 300 (per day) = \$ _____

Special Event fee \$ 300 (per person) = \$ _____

Matt Pritchard Wavecamp \$ 400 (per person) = \$ _____

Demo Gear Insurance (\$20 per \$100 damage) = \$ _____

Gift Card Option *for Ticket to Ride, gear or gratuities* = \$ _____

Gift Card Option *for purchases at the campo Campstore* = \$ _____

Subtotal = \$ _____

Adjustment = \$ _____

Total Due = \$ _____

IMPORTANT -

Full payment is due at time of booking.
Your e-mail address is required to receive
important travel information.

PAYMENT INFO

Name (as it appears on card) _____

Billing Address _____

City _____ State _____ Zip Code _____

Telephone (at billing address) _____ Alternate # _____

Credit Card Type _____ CC # _____

Exp. Date _____ Security # (3 or 4 digit number) _____ Country of Billing Address _____