



GROUP BOOKING FORM

NAME OF GROUP

ADDRESS POSTAL CODE

CITY/TOWN TELEPHONE FAX

EMAIL ADDRESS

DATE OF VISIT CONTACT PERSON

NUMBER IN GROUP NUMBER OF SUPERVISORS AGE OF GROUP TYPE OF GROUP

ARRIVAL TIME DEPARTURE TIME

GUIDED TOUR []Yes []No ENGLISH GUIDE [] FRENCH GUIDE []

Special Notes: To confirm number in group 3 days before visit or to give 24 hours notice of canceling your visit, please contact us at : info@papanack.com or 613-673-4973 only!

FOR OFFICE USE

GUIDE

Adults @ \$ = \$
Youth @ \$ = \$
Child @ \$ = \$
TOTAL @ \$ = \$

NUMBER OF ADULTS AT NO CHARGE

LESS DEPOSIT \$

TOTAL \$

Paid by: Cash, Cheque, C.C, To be Billed - Invoice given Y N