



4-Time Group Date Selection Form

Group Name: _____

Group Coordinator: _____

Phone: _____ email: _____

Instructions: Please write in the 4 dates of your group visit and submit this form back to Nordic Mountain. Also, select a make-up date. Please note that the make-up date is for the entire group only if you must miss one of your first 4 visits due to weather. It is not intended for individuals that miss one of the 4 visits. We will no longer be issuing credits to individuals for time missed.

Eligible dates are any Monday – Friday night after 4:30pm, excluding the Holiday Week.

****Please note:** There are capacity issues on certain nights. We will accommodate night selections on a first come—first served basis. If you are looking to avoid large crowds, avoid picking Friday nights.

Trip 1	
Trip 2	
Trip 3	
Trip 4	
Make-Up Trip	

Please enter your best estimate of arrival time:

Please mail or email this form to:

Jolie Venton-Walters

Group Sales

W5806 County Rd W

Wild Rose, WI 54984

Cell: 920-209-1462

jolie@nordicmountain.com