

# Travis Outdoor Recreation/Travis Marina Private Sailing Trip Reservation Agreement

273 Ellis Drive Travis AFB, CA 94535 707-424-0969 www.travisfss.com  
travis.odr@gmail.com



Your Name	Today's Date
Mobile Number	Email

## Trip options:

## Payment:

Requested Tour Date and Time:

VISA  MASTERCARD

Total number of guests:

**Do Not Provide CC #. You can stop in to make payment or ODR will call you for payment.**

Card Number

Exp Date

Required deposit: \$150 (Covers 6 person maximum)

**Total Charge:** \_\_\_\_\_

## Read and initial all items:

\_\_\_\_\_ **(1) Deposit.** I understand a minimum deposit is due at the time I secure my reservation date.

\_\_\_\_\_ **(2) Balance.** I understand my remaining balance must be paid in full no later than 7 days prior to my reservation date or reservation will be canceled.

\_\_\_\_\_ **(3) Reservation.** I understand my reservation is on: \_\_\_\_\_ and will not be extended if my group shows late.

\_\_\_\_\_ **(4) 10+.** I understand everyone in the party must be 10 years of age or older. Unsupervised minors are not allowed on the trip.

\_\_\_\_\_ **(5) No show.** I understand if my party is a no show, I will forfeit all fees paid.

\_\_\_\_\_ **(5) Cancellations.** Any cancellation must be made prior to 72 hours of the reservation.

AGREEMENT: I have read and understand all of the terms and conditions found above. I understand the deposit is non refundable if trip is canceled within 72 hours of the reservation date. Please email completed agreement to [travis.odr@gmail.com](mailto:travis.odr@gmail.com)

Signature

Date

Travis Outdoor Recreation / Travis Marina | 424-0969 | [www.travisfss.com](http://www.travisfss.com)

Receipt # Deposit: \_\_\_\_\_

Receipt # Payment: \_\_\_\_\_