



2011 MARINELAB RESERVATIONS REQUEST

You may fill this out using your computer and email it back to coordinator@marinelab.org, or you may print it out and fax it to us at (305) 451-3909.

School/Organization: _____

City/State _____

Contact Name: _____

Daytime phone: _____ Best time to call: _____

Email address: _____

Type of program (# days/# nights): _____ Same as last year? ___Y ___N

Number of boats: _____ Number of students plus adults: _____

Special notes: _____

PLEASE LIST YOUR FIRST, SECOND, AND THIRD CHOICE OF DATES:

First Choice: _____

Second Choice: _____

Third Choice: _____

I MUST AVOID THE FOLLOWING DATES:

In the event of conflicting program requests, please indicate which has a higher priority:

____ I will take _____ fewer boats if I can have my first choice of dates.

____ I must keep my number of boats as indicated.

REQUESTS MUST BE RECEIVED ON OR BY FEBRUARY 25, 2010

Questions? Contact Ginette Hughes at (800) 741-1139 or at coordinator@marinelab.org!