



Calypso Bay & Coconut Cove Waterpark
2019 Summer Camp Reservation Request

Please complete form legibly

Calypso Bay Waterpark
 561-790-6160
 561-242-6938, fax
 LDalton@pbcgov.org

Coconut Cove Waterpark
 561-629-8853
 561-656-7348, fax
 GPosteraro@pbcgov.org

Camp Name: _____

Primary Contact (first and last name): _____

Phone Number: () **Fax Number:** ()

Street Address: _____ **City, Zip Code:** _____

Email Address (mandatory): _____

Date Requested	# of Campers	# of Counselors	Would you like a Pool Time? (circle)		Will your camp/campers be buying food from the concession stand? (circle)	
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No
			Yes	No	Yes	No

Please share anything you would like us to know about your group before your visit(s):

PAYMENT OPTIONS (select one):

- Camp will be purchasing Advanced Discount Camp Tickets.** Payment must be received by April 30, 2019 and requested reservation dates will be confirmed once payment is received.
- Summer camp tickets are valid Monday through Friday during the 2019 Season.
 - Tickets are valid for camp use only and any misuse will result in forfeiture of its privileges.
 - Not valid with any other offers or promotions.
 - Tickets are non-refundable.

_____ **Total # of Advanced Discount Camp Tickets being purchased**

_____ Signature _____ Date

- Camp will be paying full price admission fees (including counselors) at the gate on the day of visit.** Requested reservation dates will NOT be confirmed until after May 1, 2019.

TAX EXEMPT (select one): YES No

If yes, a copy of the Tax Exempt Certificate **must be submitted** with this reservation request form.

Name on Tax Exempt Certificate: _____

