

Pinewood Shadows

Authorized Guest List

For liability reasons, only the persons listed below are approved to stay at the cabin overnight. Please list first and last names and ages of each guest in your party.

Guest #1: _____	Age: _____	Guest #2: _____	Age: _____
Guest #3: _____	Age: _____	Guest #4: _____	Age: _____
Guest #5: _____	Age: _____	Guest #6: _____	Age: _____
Guest #7: _____	Age: _____	Guest #8: _____	Age: _____

The maximum allowed guests under the standard rate is 6 persons. As noted in the contract, an additional fee will be assessed of \$10.00 per person, per night for guests in addition to 6. The maximum occupancy at the cabin is limited to 8 people. The guest total in your party may be subject to verification by property manager at any time during your stay. **Guest must disclose names and ages of anyone staying at the cabin overnight.**

By my signature below, I agree that the only individuals listed above will be allowed to stay overnight at Pinewood Shadows Cabin and I agree to the contract that I have reviewed.

Guest Name (Print): _____	Guest Signature: _____
Today's Date: _____	Phone # (during stay): _____