

Mailing address:

Black Rock Forest Consortium  
129 Continental Road  
Cornwall, New York 12518-2119  
Telephone (845) 534-4517  
FAX (845) 534-6975

## Black Rock Forest Lodge Day-Use Reservation Form

Name of Institution/Organization: \_\_\_\_\_

\_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Date & Time of Arrival: \_\_\_\_\_

Date & Time of Departure: \_\_\_\_\_

Number of Adults: \_\_\_\_\_

Number/Grade of Students: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

\_\_\_\_\_

Fees: Non-Consortium institution - \$500 per day for full day/\$250 for half day (up to 3 hours).  
A 20% deposit is required. It is fully refundable if the reservation is canceled 60 days  
before the reservation date.

***A Certificate of Insurance is required.***

*# of days*      **TOTAL\$ (full day or half day)**      **20% deposit**

Make checks payable to: ***Black Rock Forest Consortium.*** Final payment is due upon arrival.  
Please return this completed form and your deposit to the Black Rock Forest office.

Additional Contact Persons and Contact Information:

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_