

2022 HOLIDAY VALLEY SKI TRIP - ELLICOTTVILLE, NY

Name: _____ Phone _____ E-mail: _____

Address: _____

Roommates (please include age of children): _____

OVSC Member: ____ Yes and my membership is paid for current year. ____ Yes, enclosed is my membership dues for current year. ____ No, check and [membership form](#) is enclosed.

Welcome Party: Will Attend # _____ Will Not Attend # _____

Children ski and stay free but we are asking for **an additional \$10 per child** to help cover the cost of their food *for Sunday and Monday night.*

Amount Enclosed \$ _____ Date _____

Please indicate if first floor room is required due to physical condition.

Please make checks payable to OVSC and Mail Deposits/Payments:

OVSC c/o Amy Gilbert, 1095 Joe Skinner Rd., Belpre, OH 45714

For More Information Contact Trip Leader Amy Gilbert 304-483-5922 or AmyGilbert72@gmail.com