

FAMILY RETREAT APPLICATION/AGREEMENT

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

Guest Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Total Number of Occupants (including infants). The approval of this application at the stated rate is based on the number of occupants listed below. Additional guests must be disclosed to, and approved by, Na Kama Lei.

Name	Age	Name	Age
1) _____	_____	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

Your Employment:

Employer: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Spouse's Employment: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Supervisor: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Bank: \_\_\_\_\_

Phone: \_\_\_\_\_

Personal Reference: \_\_\_\_\_

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

