



Reservation Confirmation

SalmonRunHouse.com

22254 Miller Bay Road NE, Poulsbo, WA 98370

Dates: _____

Thank you for your reservation. Please review, sign and return this form within 10 days to confirm your reservation. You may also call us at 206-200-0559 or fax us at (206) 331-4222 with any corrections. Email: info@salmonrunhouse.com

Primary Guest Names:

Home Address:

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Work Phone: _____ E-mail: _____

The house is reserved for _____ people to arrive on _____ and depart on _____ for a total of _____ nights.

Rates: A 2 night minimum is required for all stays. May 1 through October 31 at \$425 per night (2 to 5 nights) or \$375 per night (6+ nights) + \$100 cleaning + 10.6% tax. November 1 through April 30 at \$375 per night (2 to 5 nights) or \$325 per night (6+ nights) + \$100 cleaning + 10.6% tax. Rates based on occupancy by up to 8 people. One or two additional guests may be added at an extra \$20 per person per night, for a maximum of 10 total. No more than 30 people may occupy the house and grounds at one time. A 50% deposit is required to reserve the house, and is refundable if reservations are cancelled with 2 weeks notice, less a \$25 cancellation fee.

_____ people for _____ nights @ \$ _____ = \$ _____

_____ extra people for _____ nights @ \$ _____ each = \$ _____

Cleaning fee @ \$100

Subtotal _____

Tax @ 10.6% _____

TOTAL _____

Deposit Date: _____ 50% Deposit: _____

Balance due is payable on arrival: _____

Payment Type: VISA MASTERCARD AMEX DISCOVER CHECK CASH

Credit Card Number _____

Expiration _____

Renter agrees that he/she has read the Rental Policies form provided separately, that they and their guests will abide by those rules, and that they accept the information provided on this form.

Notes

Signature of Renter _____

Date _____

THANK YOU! Geoff and Candace Daigle