

PICO RESERVATION CENTER

Please return the enclosed contact/information form to us indicating your wishes for further information and a telephone call from us. Or call Bob directly at **802-236-5389**. We look forward to hearing from you.

Name: _____

Address: _____

Home Tel: _____

Cell Phone: _____

E-mail address: _____

Pico Village Square # _____

VT Tel: _____

Areas of Interest

Winter Short Term Rental Program

Winter Seasonal Rental Program

Summer Short Term Rental Program

Summer Seasonal Rental Program

Have you participated in a rental program in previous year/s ? Yes No

With what company? Killington Other _____

What interests you with our program?

one-on-one relationship with each owner/renter

higher net income

other _____

Comments:

Please return this completed form to:

Pico Reservations Center

Post Office Box 90

Killington, VT 05751

One of our representatives will be in contact with you to answer your questions and to assist you in setting up your individually tailored rental program.

Thank you.