

KAIROS OUTSIDE GUEST RESERVATION FORM

Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_

Best Times/Place to Call \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Children and ages \_\_\_\_\_

\_\_\_\_\_

Special Needs \_\_\_\_\_

( ) Diet \_\_\_\_\_

( ) Transportation \_\_\_\_\_

( ) Medical \_\_\_\_\_

( ) Other \_\_\_\_\_

Comments/Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Incarcerated Family Member \_\_\_\_\_ Relationship \_\_\_\_\_

DOC ID# \_\_\_\_\_ Facility \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Guest Given Reservation Form By: \_\_\_\_\_

Mail completed and signed Reservation Form to: KAIROS OUTSIDE  
PO Box 198  
West Kennebunk, ME 04094-0198