

questions?

Call us at
800.300.6246

TOUR RESERVATION

Springtime in the Southwest May 4-10, 2019



		<u>PRICE PER PERSON</u>	<u>NO. OF TRAVELERS</u>	<u>AMOUNT DUE</u>
DOUBLE OCC:	<input type="checkbox"/> Discounted price if paying by check:	\$1,875 per person	X _____ guests	\$ _____
	<input type="checkbox"/> Full price if paying by credit card:	\$1,950 per person	X _____ guests	\$ _____
	<input type="checkbox"/> OPTIONAL Group Travel Protection <i>Add</i>	\$ 115 per person	X _____ guests	\$ _____
SINGLE OCC:	<input type="checkbox"/> Discounted price if paying by check:	\$2,295 per person	X _____ guests	\$ _____
	<input type="checkbox"/> Full price if paying by credit card:	\$2,385 per person	X _____ guests	\$ _____
	<input type="checkbox"/> OPTIONAL Group Travel Protection <i>Add</i>	\$ 145 per person	X _____ guests	\$ _____

Deposit: \$100 per person is due with reservation form to confirm your space.
 Final Payment: Due no later than March 20, 2019
 Cancellations/Refunds: Cancel prior to March 20, 2019, for a full refund.
 Cancel on or after March 20, 2019, no refunds



PREFERRED PICK UP POINT (Please check one — parking is at your own risk):

- 5:30am - Gold Coast Tours bus yard at 105 Gemini Avenue, Brea
- 6:30am - Garden Grove Elks Lodge at 11551 Trask Avenue, Garden Grove
- 7:00am - West Anaheim Medical Plaza at 3010 W. Orange Avenue, Anaheim

Traveler Name(s): 1) _____ 2) _____
 Street Address: _____ Space or Apt. # _____
 City: _____ State: _____ Zip: _____
 Phone: _____ E-Mail: _____
 Emergency Contact Name and Phone: _____

I have read and understand the cancellation and refund policy for this tour. Signature(s) of travelers required.

1) _____ 2) _____

IF PAYING BY CREDIT CARD

I authorize \$ _____ to be charged to my credit card (Visa, MasterCard, Discover or American Express)

_____ / _____

Credit Card Number _____ Name as it appears on the card _____ Expiration _____ Security code _____

Cardholder Signature: _____

NOTE: For your security, this information will be not be kept on file and will be destroyed after charge is processed.

SPECTACULAR SOUTHWEST - May 4-10, 2019

TOTAL AMOUNT DUE: _____ Guest Name(s): _____
 DEPOSIT PAID: _____ DATE PAID: _____ FORM OF PAYMENT: _____
 BALANCE DUE: _____

***** Please pay your balance no later than March 20, 2019*****
No additional payment reminder will be sent