

## John Wayne & Historic Bridges of Jowa

JULY 6-7, 2018

**INSTRUCTIONS:** Please read and complete the information and forward to Jeanie's Journeys with your deposit as soon as possible.

PLEASE PRINT CLEARLY. Fill in all blanks. If does not apply please enter N/A.

-	about this tour?				
NAME:	Finat/NI: also and a		Last		
NAME:First/Nickname					
BIRTHDAY:	RO	ROOMMATE(if Applicable):			
ADDRESS:					
	Street		City		
	State	Zip			
PHONE:	EMA	EMAIL:			
Active or Retired Mil	itary: Yes No				
OCCUPANCY: \$199	(per person) Double/Trip	ole	\$249 (per person) Sing	le	
SLEEPING ARRAN	GEMENTS: 1 BED	2 BED	S:DOESN'T	MATTER:	
Wine tasting is include	d and features 6 different	wines to try. <b>D</b>	o you plan to participa	te? Yes No	
TRAVEL INSURANC	CE: I would like TRAVEL I	NSURANCE at	\$19 per person: please cl	heck one YesNo	
Full refund up until the departure is \$19	hree days before departur	re, after that d	ate, no refunds. Insurar	nce which covers up to day o	
FINAL PAYMENT D	<b>ATE:</b> June 15, 2018				
PAYMENT: Please cl	neck one: Deposit of \$50	per person _	OR Full A	Amount	
Please check one(Cash	or Check preferred):	Снеск:	Cash:	Credit Card:	
CREDIT CARD (Please	circle one): VISA MC	Discover	American Express		
Name on card:		Numb	er:		
Expiration Date:	CVS three (or fo	our if Am Ex)	letter code:	_	
If you have any question	ons or need help with regi	stration call 61	2-229-5276 or Jeanie@0	CrossPointTours.com	
	Please pay by cas	h or check. Ple	ase make checks out to:		

Please pay by cash or check. Please make checks out to Jeanie's Journeys

P.O. Box 480042 Minneapolis, MN 55448 www.CrossPointTours.com