



TOUR REGISTRATION BRANSON IN SPRING March 11-16, 2018

INSTRUCTIONS: Please read and complete ALL the information and send to Jeanie's Journeys with your deposit as soon as possible. PLEASE PRINT CLEARLY

How Did You Hear About This Tour? _____

NAME: _____
First Middle Last

ROOMMATE(if Applicable): _____
First Last

ADDRESS: _____
Street City
State Zip

PHONE: _____ EMAIL: _____

Active or Retired Military: Yes ___ No ___

Per Person Rates:(price per person sharing)

Double/Triple: _____ \$998 Single: _____ \$1,223

Payment Plan: Upon Deposit, I will receive a bill for a third of the remaining amount due. This can be paid anytime. I will then receive another bill and one more before the amount is due to be paid in full.

I would like the payment plan (please check one:) Yes ___ No ___

PEOPLE PER ROOM: One ___ Two ___ SLEEPING ARRANGEMENTS: 1 Bed ___ 2 Beds ___

Please check one: \$200 Deposit to hold your place _____ Full Amount of _____

I would like trip insurance at \$89 per person. Strongly recommended. Please check one: Yes ___ No ___

PAYMENT: Please check one: CHECK: _____ CASH: _____ CREDIT CARD: _____

Final payment is due:

CREDIT CARD (Please circle one): VISA MC Discover American Express

Name on card: _____ Number: _____

Expiration Date: _____ CVS three letter code: _____

If you have any questions or need help with registration call 612-229-5276 or Jeanie@CrossPointTours.com

Please pay by cash or check. Please make checks out to: CrossPoint Tours

Jeanie's Journeys

P.O. Box 480042

Minneapolis, MN 55448

Office Use Only:

Date Recieved: _____ Amount Paid: _____

For Payment Plan: Amount: _____ Date _____ Amount: _____ Date _____ Amount: _____ Date _____