



GIRLS GETAWAY TO GALENA!

September 7- 9, 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.

Where did you hear about this tour? _____

NAME: _____
First/Nickname Last

BIRTHDAY: _____ **ROOMMATE**(if Applicable): _____

ADDRESS: _____
Street City

State Zip

PHONE: _____ **EMAIL:** _____

Active or Retired Military: Yes _____ No _____

OCCUPANCY: \$495 Double/Triple _____ \$645 Single _____

SLEEPING ARRANGEMENTS: 1 BED _____ 2 BEDS: _____ DOESN'T MATTER: _____

Our hotel may not have an elevator to the 2nd floor since it is in an older city. We will have rooms on both the first and second floors. Please check one of the following:

I am able to use stairs to get to the second floor of my hotel: Yes _____ No _____

TRAVEL INSURANCE: I would like TRAVEL INSURANCE at \$19 per person: please check one Yes _____ No _____

Full refund up until three days before departure, after that date, no refunds. Insurance which covers up to day of departure is \$19

PAYMENT: Please check one: **Deposit of \$100 per person** _____ **OR Full Amount** _____

Please check one(Cash or Check preferred): **CHECK:** _____ **CASH:** _____ **CREDIT CARD:** _____

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

Name on card: _____ **Number:** _____

Expiration Date: _____ **CVS three (or four if Am Ex) 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:

Jeanie's Journeys
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