

TRAVEL REGISTRATION

NEW YORK CITY at CHRISTMAS TIME

December 2-10, 2020

9 Days - 8 Nights

Departing from Gainesville, FL

Departing from Jacksonville, FL

Passenger Names:

Today's Date: _____

Name: _____

Sex: Male Female

Preferred Name (Nametag): _____

Mailing Address: _____

Telephone: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____

Email Address: _____ Roommate: _____

Emergency Contact: _____ Relationship: _____

Telephone: _____ Alternate Phone: _____

Travel Protection Plan: \$69.00 per Person Accept Decline

Premium must be paid before final payment.

Name: _____

Sex: Male Female

Preferred Name (Nametag): _____

Mailing Address: _____

Telephone: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____

Email Address: _____ Roommate: _____

Emergency Contact: _____ Relationship: _____

Telephone: _____ Alternate Phone: _____

Travel Protection Plan: \$69.00 per Person Accept Decline

Premium must be paid before final payment.

\$999.00 Per Person Double Occupancy (Optional Travel Protection \$69.00)

\$359.00 Additional for Single Occupancy (\$1,358.00 Single Optional Travel Protection \$94.00)

NOTE: This Adobe downloadable Registration form can be downloaded and filled out then saved and printed or emailed. Or, if being filled out from a printed copy, just fill out around the zeros.

Number of Passengers _____ @ _____ \$ _____

Travel Protection Plan _____ @ _____ \$ _____

TOTAL AMOUNT DUE \$ _____

\$100.00 per person Deposit Due with Registration

DEPOSIT AMOUNT \$ _____

Tour # 1685123

Check # _____

AMOUNT ENCLOSED \$ _____

FINAL PAYMENT DUE September 25, 2020

Mail to: Senior Adult Travel Inc. PO Box 142045 Gainesville FL, 32614

For additional information contact: Jerry Nash 352-727-2268 jerry@senioradulttravel.com

FAITH BASED TOUR HOSTING SERVING THE NORTH FLORIDA AREA

Senior Adult Travel Inc is registered with the State of Florida as a Seller of Travel Registration Number ST40596