

TRAVEL AND ACCOMMODATION INFORMATION

Names(s) _____

Trip _____
Name Dates

ACCOMMODATIONS

____ Okay for sharing double room. I would like to share with: _____

____ I prefer a single room (if available). I understand there will be a single supplement charge for separate accommodations.

____ I plan to arrive before the trip begins and will need reservations made for the following nights:

_____.

____ I plan to stay after the trip ends and will need reservations made for the following nights: _____.

TRAVEL ARRANGEMENTS:

Arrive: _____
Airline Flight # From (city/state)

Departure Date and Time

To (city/state)

Arrival Date and Time

Depart: _____
Airline Flight # From (city/state)

Departure Date and Time

To (city/state)

Please return this form at least sixty days prior to your departure date.