

Reservation Form – Exclusively Italy 2010
Blue Horizon Travel 13 Day Custom Tour with Linda Meadors

July 24-Aug 5, 2010

Name as it appears on your passport

(1) _____ (2) _____ #Passengers _____

Address: _____

City: _____ ZIP: _____

Phone (Home): _____ Phone (Business): _____ Cell: _____

Email Address: _____ @ _____

Date(s) of Birth: Passenger one _____ Passenger two _____

Passport Number(s) & Exp Date(s) (1) _____ expiration _____

(2) _____ expiration _____

Passport must be valid through 2- 6- 2011

Emergency Contact Information/Name/Address/Phone/Relationship _____

Departure City: _____ Sharing Room with: _____

Double Occupancy: _____ Single Occupancy (\$635 supplement applies) _____

Do you plan to fly with frequent flyer miles? _____

Special Dietary, Medical, or Physical Needs: _____

Other special requests: (bedding, non-smoking, seat preference, frequent flier #'s, etc): _____

Celebrating a special occasion (birthday, anniversary, etc.)? _____

Pricing worksheet

Exclusively Italy \$3499.00 per person land tour only \$ _____

based on double occupancy. Single supplement- add \$635

Air quotations available Sept 2009 \$ _____

Trip cancellation insurance land tour only **\$200 pp** (see other side) \$ _____

Additional insurance may be purchased to cover pre & post tour travel & air

TOTAL AMOUNT \$ _____ Tour

Deposit of \$500 pp + insurance \$200 pp Final Balance due 3/31/10

Check enclosed \$ _____ Check # _____ payable to Blue Horizon Travel

Credit Card Number _____ Exp. ____/____/____

3 or 4 digit security code on back of card _____

Name on Card: _____ Signature _____

Address of cardholder if different from above _____

Send Payments to Blue Horizon Travel, Attn: Diane Gelaude, 12570 US Hwy 150, Orion IL 61273

Rev. 5-1-09

Main office phone 800-939-4334 Fax 309-526-8333 on line materials @ www.bluehorizon.net

For information please call Linda Meadors 309-912-4888 Email: Linda@bluehorizon.net