



Reservation & Traveler Information Form

Group: First State Bank Vista Club

Name of Tour: Boston & Cape Cod

Trip Dates: September 4 – 10, 2019

Initial deposit: \$350 per person is due with completed reservation form

Due by: February 21, 2019

Optional Trip Protection Plan: \$239 for DBL; \$289 for SGL

Final Payments Due: June 15, 2019

Traveler 1

Name: _____ Birth Date: _____ Male Female

(As it appears on Photo ID)

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ TSA/Global Entry #: _____

Traveler 2

Name: _____ Birth Date: _____ Male Female

(As it appears on Photo ID)

Address same as above Telephone same as above

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ TSA/Global Entry #: _____

Rooming Accommodations: Single / Double

Emergency Contact: _____ Phone #: _____

Preferred Name(s) on Name Tags _____

I am (We are) celebrating _____

Dietary Restrictions: _____

Payment for trip can be made by 1) Check, 2) Cash, 3) Debiting an FSB deposit account OR 4) Credit Card

Make Checks Payable to: First State Bank Vista Club

Travelers paying: Together OR Individually

Payment Summary Information:

Traveler 1

Traveler 2

Deposit Amount Included: \$ _____ \$ _____

Optional Trip Protection Plan: \$ _____ \$ _____

Total Amount Enclosed: \$ _____ \$ _____

CC Payment Option: MasterCard Visa American Express

Credit Card #: _____ Exp. Date: _____

Amount to be charged: _____ Signature: _____ Date: _____