

REGISTRATION FORM (one per passenger)

Reservations are on a first come first serve basis.
Please sign up early to secure your place.

**WARRENSBURG CHAMBER OF COMMERCE &
CURTAIN UP THEATRE TOURS
NEW YORK CITY
OCTOBER 16-20, 2019**

PLEASE PRINT, CIRCLE AND CHECK THE APPLICABLE INFORMATION

Name: Mr./Mrs./Ms.: _____ Date of Birth: ___/___/___

Billing/Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Cell Phone: _____

Traveling in a: Single occupancy 2 person occupancy 3 person occupancy
 4 person occupancy

Please list the names: _____

TRAVEL PROTECTION PLAN: We strongly recommend protecting your trip with an Optional Travel Protection Plan.

PAYMENTS: Deposit of \$500 per person due at time Registration.

Participants must register by May 1, 2019 to guarantee a spot on the trip. Balance will be due August 1, 2019. **Check or Cash**

(Checks should be payable to Curtain Up Theatre Tours)

CANCELLATION POLICY:

I have read the schedule of activities for the Warrensburg Chamber of Commerce/Curtain Up Theatre Tour -New York City Adventure-October 16-20, 2019 and accept the terms and conditions. A \$500 deposit is required at the time of booking. Deadline to sign up is May 1, 2019. The balance of the trip is due August 1, 2019. Once theatre tickets and airline tickets are purchased, these items are non refundable. Refund after full payment is made is dependent upon resold or components of the trip or elements refundable to Curtain Up Theatre Tours.

Signature: _____ Date: _____