RESERVATION FORM

Athens State University Alumni - Savannah Tour March 12 - 15, 2012

Name:		Phone/Cell:		Email:	
Street:	City:			State:	Zip+4:
Emergency Name / Phone:					
Roommate:		ne/Cell:		Email:	
Roommate:		ne/Cell:		Email:	
Roommate:		ne/Cell:		Email:	
Smoking Room? Y N	Limited Mobility? Y N	Diabetic? Y N	Trip Insuranc	e? Y N	
•	bility that prevents your indep ull responsibility for your care	• •	st be accompanie	ed by a travel co	mpanion
Cost Per Person / No. Sha	ring Room: Single (\$889)	Double (\$749)	Triple (\$719)	Quad (\$699)	
Options					
 Travel Guard Trip Ca 	ancellation & Interruption Insu	rance: Add \$64pp	(Single, Double,	Triple); or \$48p	p (Quad)
 Hotel Room Type (C 	ircle): Single Double	Triple Quad			
For Information or to Mak	e Reservation: Call	Alumni Affairs at (256) 233-8185 c	or email alumni@)athens.edu
Checks Payable to: AS	SU Alumni / Purpose: Savanna	ah 2012			
Mail Checks to: Athens State University, Attn: Alumni Affairs, 300 North Beaty Street, Athens, AL 35611					
RESERVATION FORM					
Goodtime Travel Tours					
		Email addres Home	·S		
Name(s)		Ph:		Cell Ph:	
Work Phone Emergency Name & Phone No.					
Street	City		State	Zip+4	
Roommate(s)	F	hone	Cell	Ph:	
Smoking Room?	Limited Mobility?	Dial	betic?	Desire Trip	Insurance?
NOTE: If you have a d	isability that prevents your ind	lependence, you n	nust be accompa	anied by a travel	companion
	e full responsibility for your ca				
	Name	Tour Date(s)	De	posit Attached	Trip Insurance \$
1.					
2.	<u> </u>		 ,		
5 .					

NOTE: Please Make Separate Checks for Each Tour