



# Registration Form - Cruise or Fly Tours ONLY



Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Nick Name (For name tag): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ (H) \_\_\_\_\_ (C)

Email: \_\_\_\_\_

Roommate Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Nick Name (For name tag): \_\_\_\_\_

(Please fill out separate registratin if roommate has different address)

Special Requests: \_\_\_\_\_

Tour Location: \_\_\_\_\_ Special Occasion: \_\_\_\_\_

Occupancy per room: (Circle One)

Single (1 person)

Double (2 people)

Triple (3 people)

Quad (4 people)

Room Request: (Circle One) \*Based upon availability

1 Bed

2 Beds

Handicap (Explain Need): \_\_\_\_\_

Pick-up/Drop-off locations: All Cruise & Fly Tours will meet at Minneapolis/St. Paul International Airport

Other States & Cities (Pre-arranged by ChmieBell Tours): \_\_\_\_\_

Allergies (Explain): \_\_\_\_\_ Amount Enclosed: \_\_\_\_\_

Where did you hear about us? \_\_\_\_\_



Travel Protection:

Plan to Purchase

Decline

(Please check one)

Signature: \_\_\_\_\_

(You agree to terms and conditions)

Please mail payment and completed form to:

**ChmieBell Tours**

**15972 Havelock Ct**

**Apple Valley, MN 55124**



**Contact us at: 612-749-6330**