

**WENDINGER TRAVEL
RESERVATION APPLICATION**

Springtime Tulip River Cruise ~ April 7 – 15, 2025

Please return to:
P.O. Box 386
New Ulm, MN 56073

Wendinger Travel
Email: info@wendingertravel.com

Telephone: 507/359-3111

Please reserve _____ places for me/us on the *Springtime Tulip River Cruise* vacation.
Enclosed is my/our check in the amount of \$_____ (\$750 per person).

IMPORTANT: Please contact Wendinger Travel for information regarding Travel Protection.

☐ I/we would like a Lower Deck Cabin

☐ I/we would like an Upper Deck Cabin

Please make checks payable to: **INTERTRAV CORPORATION**

Payments can be made by credit card; however, a 4% surcharge applies on all transactions.

Card Number: _____ Expiration Date: _____

Amount to Be Charged: _____ Billing Address: _____

Signature: _____

☐ Mr. ☐ Mrs. ☐ Ms. _____
(PRINT FULL NAME - IDENTICAL TO PASSPORT)

☐ Mr. ☐ Mrs. ☐ Ms. _____
(PRINT FULL NAME - IDENTICAL TO PASSPORT)

Address _____

City _____ State _____ Zip Code _____

Telephone(_____) _____ (_____) _____
Area Code Home Area Code Cell

E-mail: _____

I will room with (if other than spouse): _____

Name(s) of other passengers you are traveling with: _____

Wheelchair at airport and/or special dietary needs: _____

☐ I do not have a roommate but will share. If a roommate cannot be found, I will pay the supplement.

☐ I desire single accommodations (subject to availability) at the supplementary charge of \$640.

PLEASE ENCLOSE A COPY OF THE PHOTO PAGE OF YOUR