

**Austin's Dance Elite, Gravity Dance Company
& Verge Dance Company
Reservation Travel Form for Chicago Summer Tour 2010**

DEADLINE TO TURN IN THIS FORM WITH DEPOSIT: **TUESDAY, NOVEMBER 10th**

Please print neatly traveler's information as should it appears on all legal travel documents.

1. FIRST NAME _____ MIDDLE NAME _____
LAST NAME _____ DOB ____/____/____

2. FIRST NAME _____ MIDDLE NAME _____
LAST NAME _____ DOB ____/____/____

3. FIRST NAME _____ MIDDLE NAME _____
LAST NAME _____ DOB ____/____/____

4. FIRST NAME _____ MIDDLE NAME _____
LAST NAME _____ DOB ____/____/____

5. FIRST NAME _____ MIDDLE NAME _____
LAST NAME _____ DOB ____/____/____

6. FIRST NAME _____ MIDDLE NAME _____
LAST NAME _____ DOB ____/____/____

Emergency Contact Name _____ **Ph #** _____
Choose an adult not traveling with you.

Contact information for adult traveling in group:

Name _____

Address _____ City _____ Zip _____

Hm Phone _____ Cell _____

E-mail _____

Please check the following that apply:

- My child will be traveling without family and will need a designated chaperone.
- I will need _____ (#) of Hotel Rooms. If more than 1 room is needed list below who is staying each room.
 - Room #1 _____
 - Room #2 _____
 - Room #3 _____
- Yes, I am interested in chaperoning and having additional dancers in my room.
- Yes, I am willing to share a room with another member and Parent. *The studio will do its best to accommodate your request, no guarantees.*
- I will only have 2 people in my room and understand that I will need to add \$720 to the total of my package price to cover hotel room.
- I will only have 3 people in my room and understand that I will need to add \$360 to the total of my package price to cover hotel room.
- I will not need air transportation and would like to make my own flight arrangements to Chicago. (The studio ask that as soon as you know your flight itinerary that you email a copy to Alisa)
- I need would like to attend the group dinner/show night and will have _____ # of people attending.
- _____ # of Chicago Summer Tour 2010 T-shirts @ \$18 each
Please Circle desired size: Child / 8 10 12 Adult / SM MED LG XLG
- _____ # of students attending Dance Classes @ \$90 per dancer approximately.

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- Please put deposit of \$100 per person, totaling \$_____ on my credit card on file. Take note that \$50 of the deposit is non-refundable per person, no exceptions.
 - RECOMMENDED:** Yes, I would like you to charge my credit card on file for the monthly trip payments.

Total Family Package Amt: \$_____

Payment methods accepted: Discover, MasterCard, Visa, cash, or check made payable to Alisa's Dance Academy

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|------------------------------|---------------------|----------------|
| STUDIO USE ONLY: | | |
| DEP AMT DUE \$ _____ | DEP AMT PD \$ _____ | PMT TYPE _____ |
| DATE _____ | BAL DUE \$ _____ | |
| Notes: _____ _____ | | |