



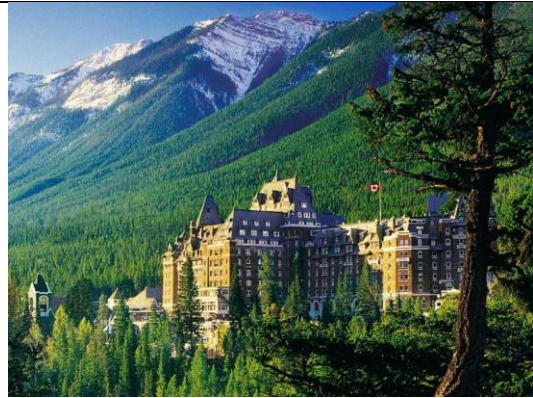
Great Resorts of the Canadian Rockies

Aug 3-12, 2023

Please provide full name as appearing on your passport				Date of Birth mm / dd / yy	Known Traveler Number (if any)	American Frequent Flyer Number (if any)
First Name	Middle Name/Initial	Last Name				
1						
2						

Address:	City:	State:	Zip:
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Home Tel:	Cell:	Email:
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Deposit \$250 + Insurance per person. Final is due 60 days prior to departure.		
Card Number:	Exp:	CCV:
Signature:		

Do you want the same card used for final payment when due?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you want Prepaid Gratuities included?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you want Optional Travel Protection?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you want Globus to provide Flex Air to Calgary with return from Vancouver	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Emergency contact: Name / Relationship / Telephone:	1 Bed <input type="checkbox"/>	2 Beds <input type="checkbox"/>

Return this form in the mail, or by email attachment, or by shooting a picture with your smart phone and texting to us.

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