



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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| | | |
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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 No

Do you want Prepaid Gratuities included?

Yes No

Do you want Optional Travel Protection?

Yes No

Do you want Globus to provide Flex Air to Calgary with return from Vancouver

Yes No

Emergency contact: Name / Relationship / Telephone:

1 Bed 2 Beds

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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