

**Paris-Normandy-Loire Tour
October 1-9, 2020**

RESERVATION FORM

Legal Name/s (as appears on passport)	Gender	Date of Birth	Daytime Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____

Mailing Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

Are you rooming with anyone not listed above? _____

Have you traveled with Globus Family Brands before? Yes No

Are you interested in extending your trip to (circle which applies): Rome Venice Como

Do you need airfare from another city? No Yes from _____

Deposit Enclosed (\$400 per person) _____

Insurance (\$239 per person) _____

Total Payment Enclosed _____

Make checks payable to GalaxSea Cruises & Tours

Please charge my credit card with the payment listed above:

Credit Card Number _____ Sec Code _____ Expiration _____

Name on Card _____ Signature _____

Credit Card Billing Address _____

Special Requests

COMPLETE AND MAIL WITH DEPOSIT TO:
GalaxSea Cruises & Tours, 210 N. Business 49, Neosho, MO 64850
Or Fax this form to 417-451-9120
Or Contact Ken Mayer, 417-451-5468, or email ken@galaxseonline