GLACIER NATIONAL PARK & CANADIAN ROCKIES TOUR July 23 – 31, 2025

Deposit of \$1000 per person due when registering for tour. Please note that \$350 of the deposit is Non-Refundable. Final payment due by 06/01/2025. Also add to the deposit the cost of travel insurance if purchasing insurance.

NAME:		United I	Mileage Plus Number:	
Date Of Birth: Month	Day	Year		
SPOUSE NAME:		United I	Mileage Plus Number:	
Date Of Birth: Month	Day	Year		
Address:	C	City:	State:	Zip:
Phone:		Cell:		
Email Address:				
Emergency Contact:		Pho	one:	
ROOMING WITH (If Not Your S	pouse)			
First:	Last:			
First:	Last:			
First:	Last:			
PLEASE MAKE CHECKS PAYA All Major Credit Cards Also Acce		d Tours (3606 Babb	ling Creek Dr Kingwood, T	X 77345)
TRAVEL INSURANCE: The cos	et of travel insurance is no	ot included with tour	cost.	
If you desire travel insurance the	cost is: \$399 per perso	on for Double & Tri	ple; Quad \$368 pp; Singl	e \$497
Yes, I wish to purchase t	ravel insurance	No, I do not w	ish to purchase the travel i	nsurance
If purchasing the insurance, y	ou must add the cost o	f the insurance to y	your deposit.	
CREDIT CARD AUTHORIZATION	ON:			
Card Holder's Name On Card: _			Amount of Authorization:	: \$
Credit Card Type: MasterC	ard Visa Di	scover Americ	can Express	
Credit Card Number:			Expiration Date	
Security Code:	_ Cardholder Billing A	Address:	Check if address is the sar	M M Y me as above
Billing Address, if different from	above: Street			
City.	State:	ZinCode	•	

SPECIAL REQUEST: (Food allergies, Handicap Room, Bus Seating Preference)