



Fall Member Trip Registration Form
Lincoln: Gettysburg, D.C., and the Hoosier Connection
September 25 through September 30, 2017

This tour includes airfare, please provide Full Legal Name and DOB (must match government issued ID or passport):

Passenger #1: _____ DOB _____

Passenger #2: _____ DOB _____

Please indicate flight seating preference (not guaranteed): Please note: Airlines do not allow pre-requests for bulk-head or exit row seating.

Passenger #1: Window / Middle / Aisle

Passenger #2: Window / Middle / Aisle

"Nick Name" (if any) as you want it to appear on your name tag(s):

1. _____ 2. _____

Contact Information

Mailing Addresses: _____ City: _____ State: _____ Zip: _____

Email: _____

Cell Phone Passenger 1: _____ Cell Phone Passenger 2: _____

Booking details

Double occupancy \$2,420.00 Member / \$2,495.00 Non-member (includes membership)
after May 15, \$2,670.00 Member / \$2,745.00 Non-member (includes membership)

Single occupancy \$2,695.00 Member / \$2,770.00 Non-member (includes membership)
after May 15, \$2,945.00 Member / \$3,020.00 Non-member (includes membership)

Inclusions:

- Shuttle service to and from airport
Round trip air from Indianapolis to Washington, D.C. / Washington, D.C. to Indianapolis
Transportation via luxury motor coach
Five-night's accommodations
Ten Meals: 5 breakfasts, 4 dinners, 1 dinner cruise
Admission to all attractions listed in itinerary
Guides services
Baggage handling (hotel only)
Great time with great IHS members

Travel Guard Travel Protection (optional but recommended): Due to unforeseen circumstances, tour participants may have to cancel or leave a tour early. With that in mind, we highly recommend the purchase of trip insurance. If you are interested in travel insurance, **please contact Jennifer Hiatt at 317-234-2670 or jhiatt@indianahistory.org for pricing.** Price based on age and cost of trip. Must be paid at the time of deposit.

I decline travel insurance: Please call to quote travel insurance fees: Travel fees: _____

Non-refundable (unless travel insurance is purchased) \$500 per person deposit due with registration.

Single occupancy: Double occupancy :

Total amount due (include travel insurance if applicable): _____

Less deposit (travel insurance must be paid in full with deposit): _____ Deposit Date: _____

Balance due by July 17, 2017: _____ (a reminder will be mailed)

Payment Type: Check _____ Credit Card _____ Credit Card: MC VISA AMEX DISCOVER

Card Number: _____ Exp. _____

Cancellation policy: without the purchase of travel insurance: prior to and including June 19, full refund; June 20-July 20, full refund, less deposit; July 21 or later, no refund.

Please list any food or other allergies and special diet requests, such as vegetarian:

Please note that not every diet can be accommodated, and that providing the information does not guarantee the ability to supply your specific dietary needs, especially for diets described as low fat and low cholesterol. Diets such as dairy free, gluten free and vegetarian can typically be provided.

Do you have any important physical conditions that may require medical attention? Medical care is not included in the trip cost nor is it guaranteed. This information is requested so that if assistance becomes necessary, correct information can be given to emergency health care providers.

Emergency Contact Information - please designate a contact who will not be travelling with you:

Name: _____ Relationship: _____

Cell Phone: _____ Alternate contact method: _____

Please complete and return the signed registration form to the address below. **By signing this you agree to the Terms and Conditions of the trip as they are described on this Registration Form.**

Signature: _____ Date: _____

Mail this signed *Registration Form* with your *Trip Deposit* to:

Jennifer Hiatt – Eugene and Marilyn Glick Indiana History Center, 450 West Ohio Street, Indianapolis, IN 46202.

For questions call – 317-234-2670.