

2005 OKLAHOMA REGISTRATION FORM - Spears Travel

Group Leader (contact person) _____

Address (no P.O. Box) _____

City _____ State _____ Zip _____

Home Phone _____ Home Fax _____

Work Phone _____ Work Fax _____

Cell Phone _____ E-mail _____

Name #2 _____ Child age _____

Name #3 _____ Child age _____

Name #4 _____ Child age _____

TOUR INFORMATION

Package: 3 Night Air Pkg 3 Night Land Pkg

Adjacent Ticket/Room _____

Disability Requests _____

While we do our best to honor special requests, they are contingent upon airline/hotel availability

Room Requests

King Two Beds
 Smoking Non-Smoking

HOLIDAY BOWL

Air Packages:

SINGLE # of pax _____ @ \$ 1495 per person = \$ _____

DOUBLE # of pax _____ @ \$ 1345 per person = \$ _____

TRIPLE # of pax _____ @ \$ 1325 per person = \$ _____

QUAD # of pax _____ @ \$ 1305 per person = \$ _____

CHILD # of pax _____ @ \$ 1145 per person = \$ _____

Land Packages:

SINGLE # of pax _____ @ \$ 845 per person = \$ _____

DOUBLE # of pax _____ @ \$ 695 per person = \$ _____

TRIPLE # of pax _____ @ \$ 675 per person = \$ _____

QUAD # of pax _____ @ \$ 655 per person = \$ _____

CHILD # of pax _____ @ \$ 495 per person = \$ _____

Game ticket deductions: _____ @ \$ -45 per person = \$ (_____)

Total due for HOLIDAY BOWL = \$ _____

PAYMENT INFORMATION

Check Visa M/C AMEX DISC

Amount \$ _____

Card Number: _____

Expiration Date _____ Verification Code _____

Name on Card _____

*Billing Address

Street _____

City _____ State _____ Zip _____

*A billing address is **REQUIRED** in order to process all credit card reservations

Registration taken by: _____ Date: _____ Time: _____

CAT office use ONLY AIR: _____ HOTEL: _____ INVOICE #: _____