# PASSPORT TO PITTSBURGH TRIP RESERVATION FORM

**Niagara on the Lake Tour**

# May 28-30, 2024 (Tuesday-Thursday)

**$1,250 DO**

Please return this form with your payment to by **May 1, 2024.**

Checks are payable to: **Passport to Pittsburgh**

Mail to: Kim Adley, 77 Springmeadow Court, Pittsburgh, Pa 15236

Your Tour Checklist

\_\_\_\_ Complete Tour Registration Form and submit with payment to Kim.

\_\_\_\_ Current U.S. Passport

\_\_\_\_ One suitcase and one personal carry on item

\_\_\_\_ Be ready to have fun!!

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact** (Name, Relationship, Phone #)

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## Room Selection:

Single Double

I am **Rooming with** (first and last name please)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parking your car at the church? Yes \_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Lunch Choice:**

\_\_\_\_\_\_\_\_\_\_\_ Herb-Crusted Chicken Supreme

\_\_\_\_\_\_\_\_\_\_\_ Baked Atlantic Cod

\_\_\_\_\_\_\_\_\_\_\_ Wild Mushroom Ravioli

Please list any food allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payment Method:**

Check #\_\_\_\_\_\_\_\_\_ Date Paid \_\_\_\_\_\_\_\_\_\_\_

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_