

RESERVATION AND INSURANCE FORM

PLEASE FILL OUT INFORMATION REQUESTED BELOW AND RETURN:

**FINGER LAKES & NIAGARA FALLS, NY
JULY 19-23, 2010**

RESERVATION FORM

I/we have read and understand the conditions and enclose check or money order in the amount of \$ _____
for _____ reservations.

Signature: _____

Name: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Business Phone #: _____ Emergency #: _____

Double Room _____ Single Room _____ (*ALL ROOMS NON-SMOKING*)

ROOMMATE(S): _____

ADDRESS & PHONE # OF ROOMMATE (If different): _____

PLEASE CHECK: I (we) will board the coach at: CAMDEN _____ NEW CASTLE _____

SPECIAL NEEDS: _____

INSURANCE:

NO- I/WE do not wish to purchase the Travel Insurance. **Please Initial** _____

IF YES- **Fill out insurance form** and mail with a **separate check** payable to **Dawson Tours** along with the above. **(MUST CALL DAWSON TOURS FOR PROTECTION PLAN FORM.)**

INSURANCE CAN NOT BE PURCHASED AFTER FINAL PAYMENT DATE.

Revised 06/28/10