

RESERVATION FORM Prime Time Club travels to

**“BRANSON SHOW EXTRAVAGANZA” #1795165
(6 days, 5 Nights – Monday thru Saturday
October 18-23, 2021**

Mail reservation form to:

Prime Time Club
c/o Tammy Steig
PO Box 490
Black River Falls, WI 546415
Phone (715) 284-5341 Ext.
1305
Cell (715) 579-4231

You will be required to show proof of Covid Vaccine 60 days prior to departure to participate in this trip per Diamond Tours, Inc.

Payment for **Branson trip** should be made out to the **“Prime Time Club”**.

*Payment for **Travel Insurance** needs to be paid with a separate check to **“Travel Insured International”**.

Prime Time Member ___Yes ___No
Trip will be filled with members before guests.

Cost of trip is as follows:

Reservation will be confirmed as deposit is received.

PTC Member		Travel Insurance
Double	\$689.00 pp	\$59.00 pp
Triple+	\$669.00 pp	\$59.00 pp
Single	\$868.00 pp	\$69.00 pp

A Non-PTC Member may travel twice as a guest with a PTC Member. The cost of the Non-PTC Member will be as listed for a non-member for the event when traveling as a guest.
A Non-PTC member will be asked to become a member after traveling twice with the PTC. Give Tammy a call on how to become a PTC member. Non Members are \$50.00 pp additional cost

Enclosed please find a deposit in the amount of \$_____ (\$75.00 per person is required with the reservation) to secure reservations for _____# of people. Deposit and reservation due no later than June 8, 2021. Your deposit is 100% refundable up until August 11, 2021.

Total Payment \$_____ enclosed. Today's Date _____.

Are you purchasing the travel insurance Yes_____ No_____ * See above for payment information

Your price **includes** the itinerary as printed, bus drivers' gratuity, lodging, meals as listed. Price **does not include** tip/gratuity for your housekeeping staff for your overnight accommodations, any included tips for buffet meals (a \$1 tip left at your table for the restaurant staff is appreciated). Gratuity for escort/step on guide is not included. Any questions on this please ask when making your reservations.

Final payment is due no later than August 11, 2021. If your payment is not received by August 11, 2021 your reservation will be cancelled and the next person on the waiting list will be called.

Should you cancel after your final payment is made and you do not have a replacement a refund may not be possible if you have not purchased the travel insurance. . We will always try to help find you a replacement if we have a waiting list. In case of a cancellation we will not guarantee a replacement for you.

Legal Name _____
(as appears on driver's license or state identification card)

Date of Birth _____ Gender
(MM/DD/YY) _____ M ___ F ___

Roommates Name _____

(MM/DD/YY) _____ M ___ F ___

Your Address _____

Telephone # _____

City _____ State _____ Zip _____

Email _____

Of beds needed in hotel room ___1 or ___2

Handicap accessible room __Y or_N We can't guarantee a handicap room will be available, we will try our best. All handicap rooms have only 1 double bed in them. +Only 2 beds available in a triple occupancy (no roll- away available).

Trip departure location is Jackson County Fair Parking lot at 388 Melrose St, Black River Falls, WI

Emergency Contact Name _____
Relationship to you _____

Phone # _____

If you have purchased the travel insurance, please check box that you have received a copy of the plan.

By signing below you are allowing the Prime Time Club to communicate itineraries, schedules and trip details by email to you.

_____ dated _____.