

Please fill out and return

TOUR: Spotlight on San Antonio Holiday

DEPARTURE DATE: Nov 25, 2018

GROUP NAME: Southwest Valley Chamber of Commerce

BOOKING NUMBER: 877676

AVAILABLE PREPAID OPTIONS

Personalize your tour by adding an optional activity below. Our recommended options have been carefully chosen to help enhance your individual experience. Complete the provided Prepaid Options Form to reserve your options.

Availability is limited and reservations are on a first come, first served basis. Payment must be received no later than 15 days prior to departure. Prices are subject to change. Children under the age of 18 **MUST** be accompanied by an adult.

PASSENGERS NAME: (Please submit a separate form for each passenger)

Salutation: _____ First: _____ Middle: _____ Last: _____ Suffix: _____ Nickname: _____
(Mr., Mrs., Rev.) (Please print **EXACTLY** as it appears on the government issued travel identification) (Jr., Sr.)

✓	Option	Price Per Person (USD)
	Historic Pearl District Walking Tour & Dinner <i>This optional tour operates in all weather conditions. Cancellations are not allowed once the optional tour is purchased.</i>	90.00

Please make checks payable to Southwest Valley Chamber of Commerce and send to:

Southwest Valley Chamber of Commerce
Attn: Danielle Brown
289 N Litchfield Rd
Goodyear, AZ 85338-1227



TRAVEL DATE: 11/25/2018 TERRITORY: T5
RES#: 877676

Spotlight on San Antonio Holiday

For Reservations Contact: Danielle Brown 623-932-2260 email: danielle@southwestvalleychamber.org
Southwest Valley Chamber of Commerce, 289 N Litchfield Rd, Goodyear, AZ 85338-1227

A deposit of \$500 per person is due upon reservation. Reservations are made on a first come, first served basis. Reservations made after the deposit due date of May 18, 2018 are based upon availability. Final payment due by September 26, 2018. Deposits are refundable up until May 25, 2018.

YOUR INFORMATION:

Clearly print your full name (first/middle/last) **as it appears on your government issued travel documentation.**

IMPORTANT: In order to avoid any unnecessary change fees, it is imperative that all guest names are entered correctly from the start. The information below must be the legal name and be 100% identical to the ID being used to travel <passport/driver's license> including middle names or suffixes <Jr, Sr>.

First: _____ Middle: _____ Last: _____ Suffix: _____

Nickname: _____ Gender: () Male () Female Date of Birth: month _____ day _____ year _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: () _____ Cell: () _____ Email Address: _____

Should you become ill or injured, whom should we contact (not traveling with you): _____ Phone: () _____

ROOMING WITH: Check if address is the same as Passenger #1

First: _____ Middle: _____ Last: _____ Suffix: _____

AIR GATEWAY: Departure airport for this tour: _____

Air Seat Request: () Aisle () Window () Next To Traveling Companion

Collette cannot guarantee your seat preference. If you have not purchased air through Collette and wish to purchase transfers, you must transfer at our pre-scheduled times.

Please be advised, when travelling as part of a group, many airlines do not provide seat assignments. Preferred seating may be available for an additional charge.

"Federal law forbids carriage of hazardous materials such as aerosols, fireworks, lithium batteries & flammable liquids aboard the aircraft in your checked or carry-on

baggage. A violation can result in 5 years' imprisonment and penalties of \$250,000 or more. Details on prohibited items may be found on TSA's "prohibited items" web page:

[http://www.tsa.gov/traveler-information/prohibited-items.](http://www.tsa.gov/traveler-information/prohibited-items)"

TRAVEL PROTECTION: () Yes, I wish to purchase travel protection \$110 () No, I decline

If you choose not to purchase Collette's Waiver Insurance Plan, you will incur penalties for changes and cancellations. Travel Protection Payment is due with first deposit. The Waiver Fee does not cover any single supplement charges which arise from an individual's traveling companion electing to cancel for any reason prior to departure. The single

supplement will be deducted from the refund of the person who cancels. (There is coverage under Part B which includes a single supplement benefit of \$1,000 for certain covered reasons. See Part B for details.)

ON TOUR ACTIVITIES: Please choose one of the following on tour activities

Please Choose One: *(subject to availability)*

- () Omni La Mansion del Rio – Standard (included)
- () Omni La Mansion del Rio – Superior (additional charge of \$140.00 double, \$280.00 single required)

Please Choose One:

- () The Witte Museum
- () San Antonio Botanical Gardens

PLEASE MAKE CHECKS PAYABLE TO: Southwest Valley Chamber of Commerce () Check () Credit Card

Waiver/Insurance Amount: \$ _____ Deposit Amount: \$ _____ Total amount enclosed: \$ _____

Cardholder Name (if paying by Credit Card): _____

Cardholder Billing Address: Check if address is the same as above _____

Cardholder Phone: _____ Amount: \$ _____

Credit Card Number: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Expiration Date: _ _ M M Y Y

SIGNATURE REQUIRED for acceptance of the below conditions and agreement to credit card use:

_____ Date: _____
I agree to pay according to the card issuer agreement. I understand and accept the cancellation policy, terms and conditions. Call for details regarding the full terms and conditions of your purchase.

Important Conditions: Your price is subject to increase prior to the time you make full payment. Your price is not subject to increase after you make full payment, except for charges resulting from increases in government-imposed taxes or fees.



162 Middle Street
 Pawtucket, RI • 02860
 Phone: 1-800-852-5655 Fax: 1-401-727-9014

If paying by credit card, please complete this form and return to Southwest Valley Chamber of Commerce. We can only charge your credit card for the amount noted if the signature, address and phone number are listed below. Thank you!

CREDIT CARD AUTHORIZATION FORM

BOOKING NUMBER: 877676
 DEPARTURE DATE: November 25, 2018

TOUR: Spotlight on San Antonio Holiday
 GROUP NAME: Southwest Valley Chamber of Commerce

Name of Passenger:
 Salutation: _____ First Name: _____ Middle Initial: _____ Last Name: _____ Suffix: _____
 (Mr., Mrs., Rev.) (Please print as it appears on drivers license) (Jr., Sr.)

Cardholder Name: _____
 (Please print as it appears on your Credit Card)

Cardholder Address: _____
 (as it appears on your credit card statement)

Cardholder Phone: _____

Credit Card Type: ___ American Express ___ Discover ___ MasterCard ___ Visa

Credit Card Number: _____

Expiration Date: _____ Amount to be charged: \$ _____

Cardholder's Signature: _____ Date: _____

I agree to pay according to the card issuer agreement. I understand and accept Collette cancellation policy, terms and conditions.

Participating credit card companies are now requiring a billing address and phone number for **FRAUD PREVENTION**. All information **MUST** be provided. Thank you for your cooperation!
 If using your credit card for payment, please return this Authorization Form by mail to:

Southwest Valley Chamber of Commerce
 Attn: Danielle Brown
 289 N Litchfield Rd
 Goodyear, AZ 85338-1227

Above credit card information has been called in to Collette.



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Available Options

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Children under the age of 18 **MUST** be accompanied by an adult.

San Antonio, TX

Historic Pearl District Walking Tour & Dinner

\$90 USD

Discover the rich history of San Antonio's newly renovated Pearl District, once the site of the Pearl Brewery, founded in 1881. Led by a local guide, the walking tour includes points of historic, cultural and architectural interest. Explore this mixed-use area of new and carefully restored buildings that now house restaurants, boutiques, living spaces and hotels. Dinner is included at a restaurant located in this unique and lively riverside neighborhood.

This optional tour operates in all weather conditions. Cancellations are not allowed once the optional tour is purchased. *Duration: Approximately 3.5 hours.* Please note a minimum of 10 passengers is required. Transportation is included.



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Address: _____ City: _____ State: _____ Zip Code: _____

Phone: () _____ Cell: () _____ Email Address: _____

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AIR GATEWAY: Departure airport for this tour: _____

Air Seat Request: () Aisle () Window () Next To Traveling Companion

Collette cannot guarantee your seat preference. If you have not purchased air through Collette and wish to purchase transfers, you must transfer at our pre-scheduled times. Please be advised, when travelling as part of a group, many airlines do not provide seat assignments. Preferred seating may be available for an additional charge.

"Federal law forbids carriage of hazardous materials such as aerosols, fireworks, lithium batteries & flammable liquids aboard the aircraft in your checked or carry-on baggage. A violation can result in 5 years' imprisonment and penalties of \$250,000 or more. Details on prohibited items may be found on TSA's "prohibited items" web page: <http://www.tsa.gov/traveler-information/prohibited-items>."

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M M Y Y

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