

Enrollment: To register for one of our Fall Foliage Tours, simply fill out the reservation form below and return it to us with your deposit in the amount of **\$300 per person**. When we receive your deposit, we will send you a receipt. Please send deposit and form to:

Webb Tours
2378 Evergreen Avenue
Salt Lake City, UT 84109
278-3101 or 1-800-658-8519

Reservation Form
Fall Foliage Tours 2010

Name: (as it will be on driver's license): _____

Preferred Name (if different) _____

Address (with city, state, zip) _____

Home Telephone: _____

Legal Name of spouse or room mate(s): _____

Preferred Name (if different) _____

Stateroom Accommodations:

Double (2 to a room) _____

Single (1 to a room) _____

Triple (3 to room) _____

Quad (4 to room) _____

Which Tour (Please Choose One)?

____ **September 25 to October 8 – Fall Foliage Spectacular**

____ **October 4-11 - Classic New England**

____ **October 11-17 – NYC and New England**

Email Address: _____

Birth date(s) _____

Would you like trip cancellation/interruption insurance ___ Yes ___ No ___ I'll decide later

Departure City (if other than Salt Lake): _____

If you are traveling with other people, list their names so that we can provide you with adjacent hotel rooms: _____

