

Enrollment: To register for our Smoky Mountain Fall Foliage Tour, 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
Smoky Mountain Fall Foliage Tour
October 17-22, 2011

Name: (EXACTLY as it is on your driver's license, including middle name or initial):

Name that you go by: _____

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) _____

Triple (3 to room) _____

Quad (4 to room) _____

Single (1 to room) _____

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): _____

Special Requests? _____

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

