

Mackinac Island, October 11—14, 2025

WRVM BUS TRIP REGISTRATION FORM

Please completely fill out one form for **each adult** or married couple

Name: _____ Reg Date: _____

Address: _____

City, State, Zip: _____

Cell phone # _____

Email: _____

Pick-up Location: **MARINETTE**

Select Departure Time: 10:00 Departure 11:00 Departure

Make checks payable to WRVM Inc.

Check or credit card payment due at the time of registration.

Registration Deadline is September 12, 2025

Visa MasterCard Discover Card

Card # _____

Expiration Date: _____

Signature: _____

Select Package Type and CIRCLE Room Preference

Package Type	Lakeview Room	Signature Suite	Balcony Suites
<input type="checkbox"/> Single	\$1525	\$1625	\$1725
<input type="checkbox"/> Double	\$1040	\$1090	\$1140
<input type="checkbox"/> Triple	\$935	\$970	\$1000
<input type="checkbox"/> Four	\$885	\$910	\$935
Child 6-12	\$405	Child 0-5	\$225

Total Cost: _____

Handicapped Room. Room near the elevator.

I will be rooming with: _____

