Tour: Yellowstone, Grand Tetons, and Mt. Rushmore

Departure Date: August 11, 2021

Group Name: Lindstrom Travel

Group Number: 94792

Mayflower CRUISES & TOURS

For Reservations Contact: Tony at Lindstrom Travel (815) 398-8888 or tony@lindstromtravel.com

Winnebago-Boone Farm Bureau (815) 962-0653 Stephenson County Farm Bureau (815) 232-3186

Jo Daviess County Farm Bureau (815) 858-2235 Carroll County Farm Bureau (815) 244-3001

Kane County Farm Bureau (630) 584-8660 Lake County Farm Bureau (847) 223-6506 McHenry County Farm Bureau (815) 338-1520

PAYMENT INFORMATION

Make Checks Payable To: Lindstrom Travel

Mail Deposit To: Lindstrom Travel
5970 Guilford Rd
Rockford IL 61107

Mail Final Payment To: SAME AS ABOVE

Credit Card #: _____ Exp. Date: _____

Cardholder Name & Billing Address:

☐ Single ☐ Twin ☐ Guaranteed Share

☐ One Bed ☐ Two Beds

Deposit Amount: $200.00pp

Travel Protection Plan: $See Lindstrom Travel

Total Amount Enclosed: $_____

Final Payment Due By: June 11, 2021

IMPORTANT: Please print your name EXACTLY as it appears on your government issued photo ID.

YOUR INFORMATION

Salutation: ____ (Mr., Mrs., Rev) First: _____ Middle: _____ Last: _____ (Please print EXACTLY as it appears on Passport) Suffix: ____ (Jr., Sr.) Nickname: _____

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

Phone: _____ Cell: _____ Email Address: _____

Passport Number: _____ Date of Issue: _____ Date of Expiration: _____

Issue City, State, Country: _____ Citizenship: _____

Date of Birth: _____ Place of Birth: _____ Gender: ☐ Male ☐ Female

Emergency Contact: _____ Relationship: _____ Phone: _____

ROOMING WITH

Salutation: ____ (Mr., Mrs., Rev) First: _____ Middle: _____ Last: _____ (Please print EXACTLY as it appears on Passport) Suffix: ____ (Jr., Sr.) Nickname: _____

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

Phone: _____ Cell: _____ Email Address: _____

Passport Number: _____ Date of Issue: _____ Date of Expiration: _____

Issue City, State, Country: _____ Citizenship: _____

Date of Birth: _____ Place of Birth: _____ Gender: ☐ Male ☐ Female

Emergency Contact: _____ Relationship: _____ Phone: _____

Please advise your departure airport for this tour: _____ ☐ Mayflower Air ☐ Writing Own Air