

**SOMEDAY TRAVEL**

**TRIP SUMMARY FORM**

**ALASKA CRUISE AND LAND ADVENTURE TOUR**

**August 12-23, 2019**

*Inside Cabin\* - \$5,141.00 double occupancy (+\$1,200.00 for single)*

*Outside Cabin\* - \$5,498.00 double occupancy (+\$1,600.00 for single)*

*Outside/with Balcony\* - \$6,798.00 double occupancy (+\$2,300 for single)*

*\*Price includes all flights plus transportation to/from O'Hare + bus to airport*

**One form must be completed by each separate single traveler.**

**One form must be completed by each couple.**

**Please mail to Valerie and Wayne Graczyk at PO Box 1454 Fond du Lac, WI. 54936-1454.**

**PLEASE PRINT CLEARLY:**

Full Name \_\_\_\_\_

(First)

(Middle)

(Last)

Cell Phone ( ) \_\_\_\_\_

Other Phone ( ) \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email Address \_\_\_\_\_

**Health History**

If you have a health issue, i.e., diabetes, heart diseases, etc. or any other chronic health issue, please bring a listing of your medications for our files. The reason for this is in the event of an emergency, we will need to know how to assist you.

I have had an annual physical and to my knowledge am able to travel. **Yes** \_\_\_\_\_

**EMERGENCY CONTACT**

What is the name and pertinent information for an emergency contact person who is not on the trip while you are traveling with us (Must be same name as on Pilgrim Reservation Form):

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_

Telephone/ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**ROOM MATE:**

- I do not presently have a roommate so if one is available, I would like to be matched.
- My roommate's name is \_\_\_\_\_ (this should be the same name that is listed on the Pilgrim Tours Reservation Form)
- I wish to have a single room (*See page 1 for single occupancy rate*)

**PLEASE SIGN TO CONFIRM YOU HAVE READ AND UNDERSTAND:**

\*I/We have purchased Trip Cancellation and Medical Insurance . **Yes** \_\_\_\_\_ (initial)

\*I/We have read and understand the cancellation policy and that there is a \$100 non-refundable fee with submission of the Pilgrim Tour Reservation Form. **Yes** \_\_\_\_\_ (initial)

\*I have signed and submitted a Hold Harmless Form. **Yes** \_\_\_\_\_ (initial)

\*I have read and understand the Terms and Conditions as printed on the Reservation Form & back of brochure **Yes** \_\_\_\_\_ (**initial**)

\_\_\_\_\_ Date \_\_\_\_\_  
Traveler's Signature(s)

Thank you! If you have any questions please do not hesitate to contact Valerie Graczyk at 920-539-0195 or Wayne Graczyk at 920-539-0085.

A detailed itinerary can be found at [www.somedaytravel.com](http://www.somedaytravel.com) or by calling either Valerie or Wayne.