

TRAIN MAGIC 2008- Registration Form

Please print clearly

*Last Name (passenger 1)	*Last Name (passenger 2)
*First Name (passenger 1)	*First Name (passenger 2)
Name you prefer to be called	Name you prefer to be called
Train Departure City: <input type="checkbox"/> Emeryville <input type="checkbox"/> Martinez <input type="checkbox"/> Suisun <input type="checkbox"/> Sacramento	Train Departure City: <input type="checkbox"/> Emeryville <input type="checkbox"/> Martinez <input type="checkbox"/> Suisun <input type="checkbox"/> Sacramento
Hotel Room Preferences (not guaranteed) Room Type: <input type="checkbox"/> non-smoking <input type="checkbox"/> smoking <input type="checkbox"/> Request handicapped room (if available) Bed Configuration: <input type="checkbox"/> 2 Doubles <input type="checkbox"/> 1 Queen/King <input type="checkbox"/> Rollaway bed (hotel charges extra fee for this)	
Your Address	
City, State, Zip	
Phone (home)	Phone (work or cel)
Email:	
Emergency Contact Person - Name	Phone (home) (work or cel)

Train Magic on Reno Fun Train
Date: February 29-March 2, 2008
Hotel: Eldorado Hotel & Casino

Reservation & Contact Info:
Make check payable & send w/Registration Form to:
 Michelle Kinkaid
 671 Athens St., San Francisco, CA 94112
 Phone/Fax: 415-585-6282
 Email: wcdancer@ix.netcom.com
 Web: www.michelledance.com
(see website for details)

Cancellation Policy: (from Key Holidays)
 Refund of Deposit less applicable taxes & fees up to 60 days prior to departure, 60-15 days is 25% penalty, 14 days or less & no shows are 100% penalty. Cancellations must be in writing.

***Cancellation Waiver:** (optional)
 Cost is \$9 per person (non-refundable), and must be paid at the time of final payment. It allows guests to cancel for any reason up to 48 hrs prior to departure for full refund (less \$9) (this is not travel insurance)

\$25 fee for returned checks and cc charge backs.

Registration Fees (per person)

Select Room Occupancy Type:	Qty	Rate (from)	Total
<input type="checkbox"/> Double Occupancy (2 per room)	___ x	\$325 pp =	_____
<input type="checkbox"/> Triple Occupancy (3 per room)	___ x	\$299 pp =	_____
<input type="checkbox"/> Single Occupancy (1 per room)	___ x	\$419 pp =	_____
<input type="checkbox"/> Train Only (no Hotel)	___ x	\$219 pp =	_____
<input type="checkbox"/> Cancellation Waiver*	___ x	\$9 pp =	_____
Total Amount Due			_____
<i><less Deposit></i>			_____
Final Payment			_____

Deposit (due upon booking) **Final Payment** (due by 12/15/07)

x \$20pp = \$ _____ \$ _____

_____ _____

Payment method (CK / CC / C) & Date Payment method (CK / CC / C) & Date

NOTE: Fuel surchare may be imposed by Amtrak. You agree to Cancellation Fees and Policies as imposed by Key Holidays. Details subject to change. I certify that I am over 21 years old.

Authorized Signature (1)

Authorized Signature (2)

Address, Phone, Email, Emergency Info for 2nd person (if different from 1st)

Credit Card Information:

___ Visa ___ MC ___ Discover

CC# _____

Exp Date: _____ ID# _____

Name on Card & your Billing Address:

Same as above
