

HAPPY TRAVELERS TRIP RESERVATION FORM

Return completed forms and payment at least two months prior to date of trip to:
Happy Travelers ~ Fond du Lac Senior Center ~ 151 E. First Street ~ Fond du Lac, WI 54935
Email: HappyTravelers@fdl.wi.gov Phone: 920-322-3635

NAME OF TRIP (DESTINATION) _____ TRIP DATE _____

Name/s _____

Address _____ City _____ Zip _____

Phone _____ *Cell # _____ *Email _____

CURRENT MEMBER of FRIENDS, Inc? (Circle One) YES NO **Traveling With** _____
(when tickets are needed and want seats together)

Do you have any dietary needs? _____

MY EMERGENCY CONTACTS:	
NAME _____	RELATIONSHIP _____
PHONE # _____	*CELL # _____

Make Day Trip checks payable to: HAPPY TRAVELERS AMOUNT ENCLOSED \$ _____

DATE RECEIVED _____ RECEIVED BY _____ CHECK # _____

INSURANCE: AMOUNT _____ CHECK # _____ 1ST PAYMENT _____ 2ND PAYMENT _____

GIFT CERTIFICATE: # _____ \$ _____

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