

Enrollment: To register for the **Fall Foliage Spectacular Tour**, simply fill out the reservation form below and return it to us with your deposit in the amount of \$300 per person. When we receive your deposit, we will send you a receipt. Please send deposit and form to:

Webb Tours
2378 Evergreen Avenue
Salt Lake City, UT 84109
278-3101 or 1-800-658-8519

Reservation Form

Fall Foliage Spectacular - September 23-October 6, 2017

Name: (exactly as it is on your license, including middle name or initial): _____

Preferred Name (If different): _____

Address: _____

Home Telephone: _____

Exact name of spouse or room mate(s): _____

Preferred name of room mate (if different) _____

Hotel Accommodations:

- Double (2 to a room)
- Triple (3 to room)
- Quad (4 to room)
- Single (1 to a room)

Birth Date(s) _____

Air Departure City (if other than Salt Lake City): _____

Email Address: _____

Would you like trip cancellation/interruption insurance? Yes No I'll decide later
(See attached registration details for prices)

We assume non-smoking rooms unless you specify otherwise

If you are traveling with other people, list their names so that we can provide you with adjacent hotel rooms:
