

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_  
Roommate (s); \_\_\_\_\_ (Up to 4)  
Number of people registering \_\_\_\_\_ Amount Enclosed: \$ \_\_\_\_\_ (\$100 per person) for \_\_\_\_\_ number of people  
Boarding Choices: Bloomington\_\_ Sartell\_\_ Rice\_\_ Little Falls\_\_ Baxter\_\_ Duluth\_\_ Eveleth\_\_ Virginia\_\_ Hibbing\_\_  
Are you interested in "travel protection" insurance? Yes\_\_ No\_\_ Send me a brochure\_\_  
Special Requests: \_\_\_\_\_

In Search of the Elusive Lady Slipper and Lost Forty – June 21-22