

LEGAL Name: \_\_\_\_\_ Cell # \_\_\_\_\_ Land # \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Please PRINT** – Your name must match your legal name on your passport / Enhanced License – We pre-submit a manifest list to the U.S. Canadian Border.

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Birthdate: \_\_\_\_\_ U. S. Citizen? \_\_\_\_\_

Roommates: (Legal Name) \_\_\_\_\_ Birthdate: \_\_\_\_\_ U. S. Citizen? \_\_\_\_\_

*If you are planning to bring a child, please contact us so that we can go over any important information for crossing into Canada.*

Amount enclosed: \$ \_\_\_\_\_ (\$175 PER PERSON) for \_\_\_\_\_ People Final Payment is due \_\_\_\_\_.

Are you interested in travel protection insurance? Yes \_\_\_\_\_ No \_\_\_\_\_ (If nothing is checked, we'll consider you are not interested in insurance).

*Pre-existing conditions are waived if purchased within 10 days of your initial deposit. Call our office for a brochure and further information.*

One Bed \_\_\_\_\_ Two Beds \_\_\_\_\_ Any special requests or concerns: (such as; diet restrictions, stairs, walking disabilities, etc...)

**Boarding Choice:** Sartell \_\_\_\_\_ Rice \_\_\_\_\_ Little Falls \_\_\_\_\_ Baxter \_\_\_\_\_ Bemidji \_\_\_\_\_  
Duluth \_\_\_\_\_ Virginia \_\_\_\_\_ Eveleth \_\_\_\_\_ Hibbing \_\_\_\_\_ Grand Rapids \_\_\_\_\_ **Folklorama 2024**