egal Name:				Investments/Insurance	
J			Preferred/nick	name:	
	(as printed on driver's license	e or passport)			
ate of Birth (mm/dd/ye	ear)				
Spouse's Legal Name:			Preferred/nickname:		
ite of Birth (mm/dd/ye	ear)	_			
ddress:					
	Cell Phone:				
nail address:	Roommate:				
edit Card Account #:		MasterCard Visa Expiration Date:		3 digit code:	
-		-			
_		-		Handicap Room	
·	-	King Bed			
				guaranteeu)	
Depending on flight s	schedules, a pre or post	t night at a hotel may	be required and wi	ll be an additional expense. (P	
	 Ple	ease keep this portio	n for vour records.		
			-	guest programs, and AAA canr	
	anna a aroun bealting				

An \$800.00 per person deposit is required to guarantee your reservation. Balance is due by November 1, 2018. \*\*Please review the cancellation policy on the California Winter Getaway flyer. If trip cancellations are due to covered medical reasons, refunds (less the cost of travel insurance) are handled by the Travel Insurance Company. For cancellations due to non-medical reasons, penalties or loss of payment will apply.

## Credit card payments are processed through Premier World Discovery/Chamber Explorations.

Please make your check payable to:

Go Club Attn: Amanda Grineski PO Box 246 Grundy Center, IA 50638 amanda.grineski@gnbbank.com Go Club Attn: Laura Kammarmeyer PO Box 439 Manchester, IA 52057 <u>laura.kammarmeyer@gnbbank.com</u>

Go Club Attn: Kelli Toomsen PO Box 149 Ackley, IA 50601 kelli.toomsen@gnbbank.com