

## Trip Reservation Form Eastern Europe to the Black Sea July 12-25, 2025

Please print your name **EXACTLY** as it appears on your passport. We require a copy of your passport within two weeks of making your reservation. Name corrections, after final payment due date or after tickets have been issued, will result in additional fees being assessed.

First Name (1)	Middle Name (1)	Last Name (1)
Nickname (1)	Date of Birth (1):	
Cell Phone (1)	Email (1)	
First Name (2)	Middle Name (2)	Last Name (2)
Nickname (2)	Date of Birth (2):	
Cell Phone (2)	Email (2)	
Home Address:		
Passport Number (1):	Date Issued:	Date Expired:
Passport Number (2):	Date Issued:	Date Expired:
Emergency Contact Name	and Phone Number:	
Special Request (Dietary, /	Accommodations, Wheelchair	):
Celebration During the tou	r:	
Prague, Czech Republic Pr Optional Tours: Sychrov Transylvania, Romania Pos Optional Tours: Fortified Cabin Choice (Attached): A Hungarian Jewish Heritage Single Supplement \$995: 1	st-Trip Extension (Attached) Ye Church & Organ Concert \$110 A B C D E \$60 Veliko Tarnovo & Ar am a single Yes No erson deposit & completed res	YesNo le \$120 Terezin \$85 esNo D Bran Castle \$120 F G H banassi \$105 Palace of Parliament \$105 banassi \$105 Palace of Parliament \$105 servation form is required to be added to the tour.
		nt due April 1, 2025
Signature:		:
Signature:		: ect Club Director (319) 294-2900



## **Payment options:**

2) Pay from my FSB Acco	ount.
Account Number	

3) Pay with a Credit Card (Complete the information below or call me).

Credit Card Number

Credit Card Expiration Date: \_\_\_\_\_

Credit Card 3-digit Code \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FSB Connect Club** Kathy Leesekamp CBCD 319-294-2900 1240 8th Ave Marion IA 52302