



GREATER DES MOINES BOTANICAL GARDEN

2019 TOUR RESERVATIONS

Gardens of the Northwest—Oct. 4-10, 2019

Accommodations at Courtyard Marriot Seattle Downtown/Pioneer Square,
The Resort at Port Ludlow and Hyatt Regency Lake Washington

Double Occupancy: \$3,500/person Single Occupancy: \$4,200/person

PARTICIPANT INFORMATION (Please print)

Traveler 1

Name _____

Address _____

City _____

State _____ ZIP _____

Cell Phone # _____

Alternative Phone # (if any) _____

Email _____

Traveler 2

Name _____

Address _____

City _____

State _____ ZIP _____

Cell Phone # _____

Alternative Phone # (if any) _____

Email _____

EMERGENCY CONTACTS (Must be someone who is not on the trip)

Name _____

Name _____

Cell Phone # _____

Cell Phone # _____

Alternative Phone # (if any) _____

Alternative Phone # (if any) _____

Relationship to Traveler _____

Relationship to Traveler _____

PAYMENT INFORMATION

A non-refundable deposit of \$500 is due at the time of registration to hold your space on the trip.
The remainder will be invoiced in two equal installments, due on July 1 and Sept. 1, 2019.

PAYING BY CHECK, make payable to: Greater Des Moines Botanical Garden 909 Robert D Ray Drive, Des Moines, IA 50309.

Amount \$ _____ Check # _____

PAYING BY CREDIT CARD (we accept VISA, MasterCard, AMEX and Discover)

The Greater Des Moines Botanical Garden will charge your card based on the payment schedule detailed above.

Total amount to be charged: Double occupancy \$3,500/person Single occupancy \$4,200/person

Credit Card # _____ Exp. Date _____ Security code _____

Name as it appears on the card (please print) _____

Signature authorizing deposit and subsequent installments to be charged

Date

By registering for this event and providing your details, you give the Greater Des Moines Botanical Garden permission to use your name and information as a necessary part of managing your registration.

MEDICAL/DIETARY INFORMATION

Dietary Restrictions _____

Medical Support _____

Ambulatory Needs _____

Other (please be specific) _____

TRIP COST AND CONDITIONS

This trip has been organized by the Greater Des Moines Botanical Garden, which reserves the right to make necessary changes to the itinerary due to unforeseen circumstances. Additional trip details will be provided as the departure date draws closer. You will receive confirmation of your reservation by mail within 10 business days of receipt, which will include specifics for arrival and departure times as well as recommended airports.

TOUR PRICE INCLUDES

- ✧ Transportation to/from daily destinations
- ✧ Entrance fees pertinent to itinerary
- ✧ All lodging as specified in the itinerary
- ✧ Local taxes on lodging and meals
- ✧ Tips for local guides, waiters and bus driver
- ✧ Breakfast, lunch & dinner where indicated on final itinerary

TOUR PRICE EXCLUDES

- ✧ Flights
- ✧ Personal expenses
- ✧ Airport transfers to/from the airport
- ✧ Alcoholic beverages except at tour-hosted events
- ✧ Any service or activity not specified in the itinerary
- ✧ Travel Insurance

ADDITIONAL TRAVEL INFORMATION

The primary dates for this trip are Oct. 4-10, 2019. Our trip itinerary begins with an opening night reception on Friday, Oct. 4 and concludes with breakfast on Thursday, Oct. 10. If you wish to come early or stay after the group dates to enjoy the area, please feel free to do so. Please be aware, group attendees **must** stay at our hotels for the primary dates of Oct. 4-10.

My arrival date: _____ (Group arrival is Friday, Oct. 4) My departure date: _____ (Group departure is Thursday, Oct. 10)

Check all that apply:

- Alternate arrival and departure dates yet to be determined.
- I/we would like to extend my stay at the beginning of the trip (Oct. 1, 2 or 3) at the Courtyard Marriot Seattle Downtown Pioneer Square for the additional dates as shown above, at my/our additional expense at the rate of \$199 /night single or double occupancy plus taxes/fees. The room cost includes breakfast. Discounted rates are based on availability, for up to 3 days prior to the group’s arrival.

My signature here guarantees my payment to the hotel as indicated: _____

- I/we would like to extend my stay at the end of the trip (Oct.10,11 or 12) at the Hyatt Regency Lake Washington, for the additional dates as shown above, at my/our additional expense at the rate of \$209/night single or double occupancy plus taxes/fees. The room cost includes breakfast. Discounted rates are based on availability, for up to 3 days post the group tour’s departure.

My signature here guarantees my payment to the hotel as indicated: _____

- I/we will coordinate my/our own reservation for the additional night(s) shown above at a different property and will stay at the group tour hotels only for the nights included in the group dates.

- I/we would like to have the Botanical Garden’s travel partner, Christopherson’s Business Travel to contact me/us regarding other hotel options for an extended stay.

LODGING REQUESTS

- Double occupancy guests
 - 2 guests/1 bed 2 guests/2 beds

FLIGHTS

- I/we would like Christopherson’s Business Travel to contact me/us about flights. Flight ticketing costs are \$32 per person for domestic and \$38 per person international flight assistance. In addition to helping you find a flight to meet your travel requirements, Christopherson’s will provide you with the final authorized itinerary and a phone number for support. Note that further charges may apply for additional services, such as, but not limited to, cancellations/changes after ticketing or ticketing with frequent flyer miles. More travel details to accompany full itinerary distribution post trip booking. Preferred airline: _____

ADDITIONAL NOTES REGARDING MY TRIP RESERVATION

