

# Reunion Reservation Form



Fill in and return with deposit to:

**USAF Night Rustics Reunion**  
**c/o Mid-Atlantic Receptive Services**  
**P.O. Box 1390**  
**Stephens City, VA 22655**

**YES! Sign me up for USAF Night Rustics Reunion, September 28 – October 4, 2008**

Name \_\_\_\_\_ Name \_\_\_\_\_

Name Tag Nickname \_\_\_\_\_

Name Tag Nickname \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email \_\_\_\_\_

Permission to share information with Reunion Committee  Yes  No

**Banquet Meal Choice at Old Ebbitt Grill:** (number) \_\_\_\_\_ Chicken Roulade (number) \_\_\_\_\_ NY Strip

**Package includes:** 6 nights accommodations, 6 breakfasts, 3 dinners, motorcoach service, tourmobile tickets at ANC, cathedral donation, admissions and guide service (Please see tentative itinerary at [NightRustics.org](http://NightRustics.org) website)

**Package Price with Accommodations:**

# of people   1   x Single occupancy package price \$1,536.00 per person = \_\_\_\_\_

# of people   2   x Double occupancy package price \$1,094.00 per person = \_\_\_\_\_

# of people   3   x Triple occupancy package price \$946.00 per person = \_\_\_\_\_

# of people   4   x Quad occupancy package price \$873.00 per person = \_\_\_\_\_

**Package price without Accommodations** (will not include any accommodations or breakfast):

# of people \_\_\_\_\_ x Package price without accommodations \$585 per person = \_\_\_\_\_

**Pre & Post arrival Room Rate** (Available only nights of 9/27, 10/4, 10/5 and will include breakfast):

# of nights \_\_\_\_\_ x \$145.00 per room per night = \_\_\_\_\_

**Late registration fee:** Reservations made after August 28, 2008: # of people \_\_\_\_\_ x \$25 = \_\_\_\_\_

**Subtotal** = \_\_\_\_\_

**4.5% Surcharge for Credit Card Purchases** + \_\_\_\_\_

**Total Due** = \_\_\_\_\_

**Deposit** - \_\_\_\_\_

**Balance\*** = \_\_\_\_\_

*\*due on or before August 28, 2008.*

**Deposit** of \$500.00 per person due with reservation:  
 Enclosed is my check # \_\_\_\_\_ or bill to my credit card:

*Make checks payable to: Mid-Atlantic Receptive Services*

**Reunion Package Payment – All credit card transactions will be subject to a 4.5% fee**

Circle Type:    MasterCard    Visa    Check                      Amount Paid \_\_\_\_\_

Card or check # \_\_\_\_\_ Expiration Date of credit card \_\_\_\_\_

Signature of card holder \_\_\_\_\_

Address as it appears on credit card bill (*unless same as above*) \_\_\_\_\_

**All reservation requests of Reunion Tour Package are due by July 4, 2008.**

**All cancellations made after August 28, 2008 will be charged a \$25 cancellation fee.**