



6749 E Fulton, Suite B420  
Ada, MI 49301  
Reservation Line: 800.285.0853  
Fax Line: 866.761.6571  
[info@tomstrips.com](mailto:info@tomstrips.com)

## Tour Reservation Form

Date \_\_\_\_\_ Tour Code \_\_\_\_\_ Agent \_\_\_\_\_ No. \_\_\_\_\_

Legal Name 1 \_\_\_\_\_

Legal Name 2 \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Club Affiliation \_\_\_\_\_

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Resort/Tour \_\_\_\_\_ Room Category \_\_\_\_\_

Tour Dates: Arrive \_\_\_\_\_ Depart \_\_\_\_\_

Couple \_\_\_\_\_ Single Share \_\_\_\_\_ Single Guarantee \_\_\_\_\_ Room Request \_\_\_\_\_

Comments/Special Requests/Celebrations \_\_\_\_\_

Air Schedule In \_\_\_\_\_ Out \_\_\_\_\_

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Name On Credit Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expires \_\_\_\_\_ Security code \_\_\_\_\_

Deposit \$ \_\_\_\_\_

I authorize Tom's Tours to charge my credit card for the above amount.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please charge final payment 75 days prior to departure (Initial) \_\_\_\_\_