Tour Reservation Form

Tour Name:
Mysteries of Nevada

Tour Dates:
October 6-9, 2025

Legal Name(s) as shown on government ID:

Traveler 1: _____

Traveler 2: _____

(Fill out Traveler 2 information only if you are booking double occupancy and both you and your roommate share the same address)

Room Type:

- ○ Single occupancy
- ○ Double occupancy
- ○ Other:

Preferred First Name(s) for name badge:

Traveler 1: _____

Traveler 2: _____

I would like to receive my invoice via:

- ○ Mail
- ○ Email

Number of Beds:

- ○ 1 bed
- ○ 2 beds
- ○ No preference

Contact Details for Final Invoicing and Pre-Tour Informational Call:

Address: _____

_____

City: _____ State: _____ Zip code: _____

Phone # (home): _____

Phone # (cell): _____

E-mail: _____

Further Information or Special Requests:

Roommate – if applicable

If you are rooming with someone who does not share your address, please write their name below. They will need to fill out a separate form.

Name (First Last):

_____

_____

Travel Insurance:

Travel insurance information from AON insurance is included with this tour information packet. Please see attached documents for more details. Check a box below.

☐ Yes, I will be purchasing travel insurance

- ○ Basic Plan
- ○ Enhanced plan

☐ No, I'm declining travel insurance

Please return this form to Bartlett Tours with your $25 per person deposit:

5517 N Farmer Branch Rd #129 Ozark, MO 65721

Make all checks payable to ***Bartlett Tours***