



**The Episcopal
Church Women**

Painted Churches of Schlenburg Tour

October 2-3, 2010

PLEASE PRINT:

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____

Home ph _____ Cell ph _____

E-mail _____

ROOM RESERVATION REQUEST: Please list who you will be rooming with.

First Name _____ Last Name _____

TOUR PAYMENT: \$150 per person based on double occupancy

Payment by ___ check (payable to UMC Travel LLC) OR

I authorize the above deposit to be charged to my

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