

**2008 Michigan Womyn's Music Festival
SHUTTLE RESERVATION FORM**

Please book your flights before returning this reservation form.

Name: _____

Address: _____ City: _____

State/Province: _____ ZIP/PC: _____ Country: _____

Phone: day – (_____) _____ evening – (_____) _____

ARRIVAL:

Coming from which city? _____

Connections through which city? _____

Date: _____ Arrival Time: _____ am pm

Airline: _____ Flight #: _____

DEPARTURE:

Date: _____ Departure Time: _____ am pm

Airline: _____ Flight #: _____

Names of other womyn in party that this reservation includes: _____

Please reserve _____ round trip shuttle seats at \$45 each for the above named womyn, all of whom are on the same flight as listed above.

Enclosed is a Cashier's Check or Money Order for \$ _____

Please bill my credit card \$ _____ for the shuttle tickets. MC Visa

Account #: _____ / _____ / _____ Expiration Date: _____

Verification Code: _____ [What's This?](#) Cardholder's phone: (_____) _____

Print name as it appears on card: _____

Cardholder's Signature: _____

Please print and sign this form

Billing address of credit card if different than above: _____

Completed Reservation Forms should be printed and mailed, with Cashier's Check, Money Order or credit card info and self-addressed stamped envelope, to:

WWTMC, Shuttle Reservations

PO Box 22

Walhalla, MI 49458

231-757-4766

Office Use

CS#: _____

Batch#: _____

#TixSent: _____

DateSent: _____

DateEntered: _____