

**2010 Michigan Womyn's Music Festival
SHUTTLE RESERVATION FORM**

Please book your flights before returning this reservation form.

Name: _____ Emai: _____

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 _____ one-way shuttle seats at \$35 each (\$70 round-trip per person) for the above named womyn, all of whom are on the same flights 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: _____

Security Code: _____ (the three numbers following your account number on the back of your card)

Cardholder's phone if different from above: (_____) _____

Print name as it appears on card: _____

Cardholder's Signature: _____

Billing address of credit card if different than above: _____

Completed Reservation Forms should be 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
www.michfest.com

Office Use
CS#: _____
Batch#: _____
#TixSent: _____
DateSent: _____
DateEntered: _____