



**REYNOLDS HOMESTEAD
OLD SALEM CHRISTMAS * BUS TRIP REGISTRATION**

Due to the limited number of seats available, please call first to make a “soft” reservation. Payment of **\$50.00** is due within 7 days to hold your seat. No refunds will be provided on cancellations within 72 hours of departure, unless we have a waiting list replacement. If the trip is cancelled due to low registration, a full refund will be made. Registration forms, liability waivers and full payment are due no later than **Friday, December 2.**

Trip _____ Christmas in Old Salem _____ **Date:** December 10, 2016

Name(s) _____

Address _____

City _____ **State** _____ **ZIP** _____

Home Phone _____ **Cell** _____

E-mail _____

Do you have any special needs for the trip (i.e. wheelchair accommodation?) _____

Enclosed please find my payment of _____ as full payment for the above listed trip.

Payment method: _____ Cash _____ Check (Treasurer of VT) _____ Credit Card

For credit card payments (VISA, MasterCard, and Discover only):

Name on Card _____

Card Number _____ **Exp. Date** _____

Type of Card _____ **CVV** _____ **Signature** _____

Please mail registration to: Reynolds Homestead | 463 Homestead Lane | Critz, VA 24082

Invent the Future