

CHICAGO TRIP RESERVATION FORM

NOVEMBER 9 – 13, 2017

Traveler(s) name(s): _____

Please enter the information above as it appears on the government issued ID you plan to use for airport check-in.

Traveler(s) birthdate(s): _____

Transportation:

Frequent Flier Information Airline: _____ Number: _____

Seating Preferences/Notes: _____

I/we will be making my/our own travel arrangements:

To Chicago Date: _____ Airline(s): _____ Flight No: _____

From Chicago Date: _____ Airline(s): _____ Flight No: _____

Lodging:

I/we request a room with two beds.

I am interested in sharing a room with another single traveler.

Performance Seating:

I prefer best available Orchestra seats.

I prefer best available Dress Circle seats.

Reservation Notes: _____

Reservation Fee:

With Airfare

\$2,200 Per person based on Double Occupancy

\$670 Surcharge for Solo Traveler

Without Airfare

\$1,600 Per Person based on Double Occupancy

\$670 Surcharge for Solo Traveler

TOTAL AMOUNT TO BE PAID (BY September 29, 2017): \$ _____

If your travel plans require greater flexibility, please contact Tracy Reich directly. We will be happy to help you plan the best trip possible by finding alternative flights to suit your schedule, adding or reducing your number of hotel nights, as well as accommodating other needs.

Check Enclosed (made payable to Seattle Opera)
 American Express **Discover** **MasterCard** **Visa**

Card number: _____ Expiration date: _____

Please return this form by September 5, 2017 to:

By mail:

WAM at Seattle Opera
c/o Tracy Reich
1020 John St
Seattle, WA 98109

By email:

wam@seattleopera.org