

RESERVATION FORM
Main Street Community Center
New England Fall Spectacular, October 6-14, 2024

Please Print

Today's Date: _____

This tour will depart from Main Street Community Center in Edwardsville, IL

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Single _____ Double _____ Triple _____ Quad _____

Rooming with: _____

Smoking _____ Non-Smoking _____

Special Needs: _____

Payment may be made by check, money order or credit card.

Per Person Price: \$ _____ Amount of Deposit: \$ _____ Check #: _____

Make checks out to: Presley Tours

Credit Card Type: (Circle) VISA DISCOVER MASTERCARD

Credit Card Number: _____

Expires: _____ Security Code: _____

Name as it appears on the card. _____

Please mail or take this completed form and your deposit to:

Jessica Johnson
Main Street Community Center
1003 N Main St
Edwardsville IL 62025
Phone 618-565-0300