

# AMR TRAVEL CLUB - GROUP TRIPS - 2012

Today's Date \_\_\_\_\_ Trip Name and Date \_\_\_\_\_

**\*\* PRINT CLEARLY \*\***

\*\*\*\*\*

**\*\* Please note that a \$100 per person deposit must be stapled to application \*\* Make checks payable to AMR Travel Club \*\***

**#1 Name:** \_\_\_\_\_ **#2 Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

Boardmail (if applicable): \_\_\_\_\_ Boardmail (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Club Member: Yes \_\_\_ No \_\_\_  
*(Airline employee MUST be a member of the AMR Travel Club)*

Name on Passport: \_\_\_\_\_ Name on Passport: \_\_\_\_\_

Passport # / Issuing Country: \_\_\_\_\_ Passport # / Issuing Country: \_\_\_\_\_

Emergency Contact/Phone: \_\_\_\_\_ Emergency Contact/Phone: \_\_\_\_\_

TOTAL AMOUNT PAID: \$ \_\_\_\_\_

Your signature(s) below indicates you have read the Liability Waiver and the ABC's of the AMR Travel Club, and that you agree to the terms of these documents as outlined on the website. You also agree to monitor the AMR Travel Club web page at [www.amrtyl.com](http://www.amrtyl.com), as well as your email account(s) for information relating to final payment dates, possible itinerary changes and other notices. A minimum non-refundable portion of the deposit paid is \$50.00 per person. Additional cancellation fees may apply within 120 days of departure. If you cancel and a replacement cannot be found, you may be liable for the full trip amount. *Check with your AMR Travel Club trip coordinator for detailed information on cancellation policies for your specific trip.* You have also been advised that the purchase of trip insurance through an independent provider is highly recommended.

X \_\_\_\_\_ X \_\_\_\_\_

\*\*\*\*\*

**#3 Name:** \_\_\_\_\_ **#4 Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

Boardmail (if applicable): \_\_\_\_\_ Boardmail (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Club Member: Yes \_\_\_ No \_\_\_  
*(Airline employee MUST be a member of the AMR Travel Club)*

**CONTINUED on Page 2**

# AMR TRAVEL CLUB - GROUP TRIPS – 2012

## Page 2

Today's Date \_\_\_\_\_ Trip Name and Date \_\_\_\_\_

### CONTINUED from Page 1

# 3 Name on Passport: \_\_\_\_\_ # 4 Name on Passport: \_\_\_\_\_

Passport # / Issuing Country: \_\_\_\_\_ Passport # / Issuing Country: \_\_\_\_\_

Emergency Contact/Phone: \_\_\_\_\_ Emergency Contact/Phone: \_\_\_\_\_

\_\_\_\_\_

TOTAL AMOUNT PAID: \$ \_\_\_\_\_

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X \_\_\_\_\_ X \_\_\_\_\_

\*\*\*\*\*

#5 Name: \_\_\_\_\_ #6 Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

EMAIL: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Boardmail (if applicable): \_\_\_\_\_ Boardmail (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Club Member: Yes \_\_\_ No \_\_\_  
*(Airline employee MUST be a member of the AMR Travel Club)*

Name on Passport: \_\_\_\_\_ Name on Passport: \_\_\_\_\_

Passport # / Issuing Country: \_\_\_\_\_ Passport # / Issuing Country: \_\_\_\_\_

Emergency Contact/Phone: \_\_\_\_\_ Emergency Contact/Phone: \_\_\_\_\_

\_\_\_\_\_

TOTAL AMOUNT PAID: \$ \_\_\_\_\_

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X \_\_\_\_\_ X \_\_\_\_\_