



Summer Bus Trip

Registration Form

Please complete one form per rooming group

Hosted by Bland Ministry Center

A: 65 Seddon St., Bland, VA 24315

P: 276-688-4701 E: skeene@blandministrycenter.org



PERSONAL INFORMATION

Main Contact:

Address :

Email:

Phone:

Room Preference: King Double

Rooming List: Name / Age	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please let us know any other details about your trip. For instance, if you have dietary restrictions, medical conditions, or other concerns we should know about.

Other Notes :

THANK YOU FOR REGISTERING!

The trip is subject to a minimum number of travelers We'll stay connected to let you know when we hit the mark and to follow up with any other details.

We can't wait to hit the road!

Return this form with a \$50 deposit per traveler to PO Box 211, Bland, VA 24315 to reserve your seat today!