



Travel Information Form

(Please complete and submit with deposit to Diane Harris or Venisha Hoskins)

Personal Information	
Traveler name	
E-mail	
Address	
Phone	
Church Name (If not a Member of PGC)	
Address	
T-Shirt Size	Small___ Medium___ Large___ X Large___ XX Large___
Travel Information	
Trip Destination	Orlando, Florida
Trip date	April 12, 2018 to April 15, 2018
Departure time	6:00 a.m. sharp (Arrive at PGC at 5:30 a.m.) 8:00 a.m. (Depart Resort)
Seating preference (e.g., aisle, window)	
Lodging Information	
Hotel program name(s) and number(s)	Bahamas Bay Resort
Have you reserved room?	Yes ___ No ___ Building/Room # _____
Trip Information	
Event Location	Holy Land Experience - \$55.00 due 2/28/2018
Bus Miscellaneous Cost	Non-refundable deposit - \$50 pp due 1/21/2018 \$30.00 pp due 2/28/2018
Do you need special accommodation	Wheelchair___ Walker___
Payment and Contact Information	
Payment made by check to:	Venisha Hoskins or Diane Harris Reference Sister Connections on the memo line
Contact Information:	
Diane Harris: harris.diane02@gmail.com	
Shelley Knight: xcyt2003@yahoo.com	
Venisha Hoskins: venisha.hoskins@gmail.com	