



2011 GROUP TOUR BOOKING REQUEST
 (Please print clearly and fax both completed pages to 703-777-2889)

Group Name & Name of Event: _____

Requested Event Dates(s):

1 ST Date Choice:	2 ND Date Choice:
Event/Tour Start Time:	Event/Tour End Time:
Number of Attendees:	

Requested By:

Name:	Signature:
Daytime Phone:	Fax:
Address:	
City, State, Zip:	E-mail:

Brief Group Description: _____

Special Requirements: _____

Will any members of your group be unable to tour the second floor of the Manor? _____

Group Transportation: _____ Bus _____ Van _____ Individual Cars _____ Walk-in

Guest/Group Day of Tour Primary Contact: _____

Cell Phone: _____ E-mail: _____

Are you interested in hearing about Dodona Manor events or opportunities for future group discounts? Yes ___ No ___

Would you like to receive a Dodona Manor Newsletter at the above address? Yes ___ No ___

How did you hear about Dodona Manor? _____

DODONA MANOR GROUP TOUR BOOKING 2011

PAYMENT INVOICE

GUEST CATEGORY	GUEST FEE	NUMBER OF GUESTS	TOTAL FEES
Individuals	<i>\$10</i>		
Seniors or Group Tour (10 or more guests)	\$8		
Students	\$5		
Tour Booking TOTALS:			

Instructions:

- 1.) **Deposit for 10 people (\$80.00) must accompany a group tour reservation request.**
- 2.) Please enter the number of guests under each guest category and the total fees per category in the above table, then add the columns for the total number of guests and fees for payment.

Please call one week prior to your tour to confirm the final number of attendees.

Deposit Payment:

**Please make checks payable to *The George C. Marshall International Center*
Or payment by credit card (VISA, MC, or AMEX):**

Card Number: _____ **Exp. Date** ____/____ **AMOUNT:** \$ _____

Name/Organization as it appears on Card: _____

Phone Number: _____

Signature: _____

Organization: _____

Card Billing Address: _____

Balance to be paid on day of tour via: _____ Check _____ Credit _____ Cash

Please provide payment of the balance due on date of your tour via one check, charge, or lump sum cash payment. Thank you so much for your cooperation!

BOOKING CONFIRMATION for Dodona Staff Use:

Booking Confirmed By:	Date:	Deposit Rcvd:
Dodona Contact Name: Janet R. van der Vaart		Final Payment Rcvd:
Phone Number: 703-777-1301	Email: jvandervaart@georgecmarshall.org	
Group Name:		
Confirmed and Booked Event Date(s)/Time:		

This invoice will be faxed back to the tour sponsor post payment upon request.