



Please complete the reservation form (one per person for tours including air) and return it to your FirstPartners Advisor or mail it along with your deposit to:

First Dakota National Bank
Attn: Fran Rietveld
1712 N Main St
PO Box 1306
Mitchell, SD 57301-7306
Phone: (605) 995-7910 (605) 770-3290 cell
email: frietveld@firstdakota.com

Name of Tour _____ Today's Date: _____

PLEASE PRINT

Preferred Name(s): _____

Street Address: _____

City/State/Zip: _____

Phone number (with area code): Home: _____ Cell _____

E-mail: _____

Your roommate's name, if applicable: _____

Please indicate your room preference: _____ One Bed or _____ Two Beds

Do you have any food restrictions? (Diabetic, gluten free, etc) _____

Please note if your birthday or anniversary occur during the tour:

Occasion _____ Date of celebration _____

IF THIS TRIP INVOLVES AIR OR INTERNATIONAL TRAVEL - COMPLETE THIS SECTION

Name "exactly" as it appears on your identification: _____

(A Passport is required for all travel outside of the U.S. - a current Driver's License is acceptable within the U.S.) Please send in copy of identification being used for flight.

Birth date: _____
(Month/day/year Ex: May 9, 1955)

Gender: _____ Male _____ Female

Passport #: _____ Issue Date: _____ Expiration Date: _____
Passport must be valid for six months beyond the date of departure (month/day/year Ex: May 9, 1944)

Do you need wheel chair assistance in the airport? _____

Airline frequent flyer # / TSA# _____



CANCELLATION POLICY

This policy must be read and everyone must sign it before your tour reservation is accepted.

First Dakota National Bank has purchased Trip Interruption and Cancellation Insurance on behalf of all participants. The insurance provides certain refund rights in the event you are unable to attend a FirstPartners Travel event due to medical emergency or other defined reasons. An insurance policy will be provided for you and additional information regarding the insurance, its coverage, exclusions, and limitations is available upon request.

First Dakota National Bank reserves the right to take photographs of tour participants that may or may not be used in newsletters or FirstPartners and First Dakota Travel publications.

I agree First Dakota National Bank is not liable for any losses, financial or otherwise.

I am an independent traveler and can care for myself.

My emergency contact has a valid passport.

Name: _____ Date: _____