

# REGISTRATION FORM

**King of Prussia Mall & Philadelphia Museum -----Thursday - Sunday**

**May 2 - 5, 2019**

Please complete this form and mail with payment

**Drake Travel LLC**

2548 Main Street, Suite F

Elgin, South Carolina 29045

\*\*\*\*\*

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

**King of Prussia Mall, Philadelphia Premium Outlet, Valley Forge Casino,  
King of Prussia Town Center & Philadelphia African American Museum**

**Hyatt**

**4 1/2 Star Hotel**

**Thursday - Sunday---May 2 - 5, 2019**

*Cost includes hotel, bus, museum ticket and breakfast each morning.*

*Please check appropriate room(s):*

Single King (1) \_\_\_\_\_ Double King (2) \_\_\_\_\_

(\$575.00) per person (\$350.00) per person

Double (2) \_\_\_\_\_ Triple (3) \_\_\_\_\_ Quads (4) \_\_\_\_\_

(\$380.00) per person (\$315.00) per person (\$275.00) per person

Payments: First payment Sept 25, 2018 \$75.00 pp \$ \_\_\_\_\_

Second payment Nov 25, 2018 \$75.00 pp \$ \_\_\_\_\_

Third payment Jan 25, 2019 \$75.00 pp \$ \_\_\_\_\_

Final Payment March 25, 2019 Final Amount Due \$ \_\_\_\_\_

Amount enclosed \$ \_\_\_\_\_

*Confirmation and boarding information will be mailed once final payment has been received*

**Please read all Terms and Conditions [www.DrakesTravel.com](http://www.DrakesTravel.com)**

*If you have questions please Drake Travel (803) 738-8006*

**Mail Payments to: Drake Travel P.O. Box 25395 Columbia, SC 29224**

Email: [www.DrakesTravel@aol.com](mailto:www.DrakesTravel@aol.com)

*Thursday - Sunday---May 2 - 5, 2019*

**Please provide the following information:**

**#1**

Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**#2**

Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**#3**

Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**#4**

Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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