



# BUS AMERICA GROUP TOURS

668 Phillips Road, Victor, NY 14564  
(585) 697-3529 1-800-724-TRIP Fax (585) 697-3591

## DAY TRIP REGISTRATION FORM

PLEASE PRINT CLEARLY AND MAIL TO THE ADDRESS LISTED ABOVE WITH YOUR CHECK OR MONEY ORDER (payable to Bus America Group Tours).

Trip Date \_\_\_\_\_

Trip Name \_\_\_\_\_

Group Name (if applicable) \_\_\_\_\_

Traveler(s) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City

State

Zip

Telephone Home (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Pick-up Point \_\_\_\_\_

Meal Choice (if applicable) \_\_\_\_\_

Emergency Contact (name & phone) \_\_\_\_\_

Please carry a list of your medications with you.

Describe any special medical concerns you wish to share:

\_\_\_\_\_

*Thank you for traveling with us!*

For Office Use Only

Payment Received \_\_\_\_\_ Date \_\_\_\_\_