



**WILD
PLANET**
nature tours

RESERVATION FORM: Guatemala

Please reserve _____ space(s) for the Guatemala tour.

NAME: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS PHONE: _____

ACCOMODATION: Double _____ Single _____ Shared _____ (roomate to be assigned by WPNT)

I/WE ARE: Non-smokers _____ Smokers _____

Enclosed please find advance payment of \$_____ (\$300 per person)

I/We have read and agree to the terms and conditions for this program.

SIGNED: _____ DATE: _____

SIGNED: _____ DATE: _____

COMMENTS:

PLEASE RETURN TO:

Wild Planet Nature Tours

Denver Holt or Megan Fylling

P.O. BOX 39

CHARLO, MT 59824

Phone: 406-360-9814

Email: info@wildplanetnaturetours.com or megpeter@hotmail.com