

TOUR DE FORKS REGISTRATION FORM

How to Make Your Reservations

Use Page 2 of this document

PLEASE FOLLOW THESE PROCEDURES IN MAKING YOUR RESERVATIONS:

- Advance reservations are required for all events. All reservations should be faxed or mailed. Reservations will be processed starting June 7 with the postmark or fax date determining processing order. Many events sell out early, so we urge you to return your reservation form ASAP.
- The preferred method for making your reservation is via fax to (970) 349–5626. (CREDIT CARD ORDERS ONLY PLEASE). Visa and MasterCard accepted.
- You may also mail your reservation form with check or credit card information: Center for the Arts, Box 1819, Crested Butte, CO 81224.
- Confirmation of your reservation will be sent by email once orders are processed on June 7. Directions to all destinations and other important details will be included in an email about one week in advance of the event. Please include all guests names on the reservation form.

Reservations for most events will close one week prior to the event to accommodate our chefs.

- If your plans change after making a reservation please call the Center for the Arts Tour de Forks “hotline” at (970) 349–7487, ext. 5. Please also notify the Center if someone other than yourself will be using your reservation for an event.
 - There are no refunds unless the Center changes or cancels an event.
- The tax deduction for each event will vary. A tax receipt will be mailed to you following the Tour de Forks series.

CANCELLATIONS:

- If you cancel at least seven days before an event, you may transfer to another event OR apply your entire payment as a tax-deductible gift to the Center.
- If you cancel less than seven days before an event or do not attend an event, you may not transfer and your tax-deductible gift will be reduced by the costs of the food and wine that have been purchased for you.

Due to the nature of our events, we are unable to accommodate individual dietary requirements. Thank you in advance for your understanding.

Tour de Forks Registration Form

NAME _____

HOME MAILING ADDRESS _____

(UNTIL _____)

LOCAL MAILING ADDRESS _____

(UNTIL _____)

HOME PHONE _____ (UNTIL _____)

LOCAL PHONE (Imperative!) _____ (UNTIL _____)

E-MAIL ADDRESS (Imperative!) _____

SIGN US UP! PLEASE SIGN US UP FOR THE FOLLOWING ITINERARIES:

JUNE 22	A TASTE OF THE TOWN ■ 5:00 p.m.	\$150	X _____	= \$ _____
JULY 8	DINING IN REGAL ASPENS ■ 6:00 p.m.	\$150	X _____	= \$ _____
JULY 13	ENGLISH SUPPER IN THE "TALISKER HOUSE" ■ 6:00 p.m....	\$150	X _____	= \$ _____
JULY 18	"ECLECTIC" MAJESTY ■ 6:00 p.m.	\$150	X _____	= \$ _____
JULY 21	LADIES DO THE HONORS ON BUTTE ■ 11:30 a.m.	\$40	X _____	= \$ _____
JULY 23	AN ARCHITECTURAL & CULINARY TOUR ■ 6:00 p.m.	\$150	X _____	= \$ _____
JULY 25	BACKYARD BEAUTY / NEW ORLEANS FLAIR ■ 10:30 a.m. ...	\$100	X _____	= \$ _____
JULY 27	A FASHION EXTRAVAGANZA / CB STYLE ■ 11:00 a.m.	\$65	X _____	= \$ _____
AUG. 3	A FEAST FOR THE EYES & PALETTE ■ 6:00 p.m.	\$150	X _____	= \$ _____
AUG. 5	A TEA PARTY FOR ALL AGES ■ 2:30 p.m.	\$40	X _____	= \$ _____
AUG. 7	MT. COMFORT & SUMPTUOUS DINING ■ 6:00 p.m.	\$150	X _____	= \$ _____
AUG. 10	MERIDIAN LAKE SHOWCASE ■ 6:00 p.m.	\$100	X _____	= \$ _____
AUG. 13	NORTH POLE BASIN HIKE ■ 8:00 a.m.	\$100	X _____	= \$ _____
	Please indicate your hike preference: <input type="checkbox"/> Group A — High Intensity <input type="checkbox"/> Group B — Low Intensity			
AUG. 15	RISING TROUT & LUNCH ■ 9:30 a.m. and 12:00 a.m.	\$50	X _____	= \$ _____
	Please indicate your choice: <input type="checkbox"/> Fishing Only <input type="checkbox"/> Lunch Only <input type="checkbox"/> Both			
AUG. 18	"DEATH IN THEM THAR HILLS" ■ 6:00 p.m.	\$150	X _____	= \$ _____
AUG. 21	TIMELESS BEAUTY INSIDE & OUT ■ 6:00 p.m.	\$150	X _____	= \$ _____
AUG. 26	EVENING OF EXQUISITE DINING ■ 6:00 p.m.	\$150	X _____	= \$ _____
SEPT. 5	ULTIMATE BUTTE VIEWS & DINING ■ 6:00 p.m.	\$150	X _____	= \$ _____
SEPT. 10	A TABLE WITH A VIEW PLEASE ■ 6:00 p.m.	\$150	X _____	= \$ _____

TOTAL \$ _____

I am enclosing a check payable to the Center for the Arts Please bill my VISA or MASTERCARD

NUMBER _____ EXPIRATION DATE ____/____/____

NAME ON CARD _____

Thank You!