

Reserve your trip to Normandy today!

Trip #:6-25127W

Send to UCLA Alumni Association
Attn: Alumni Travel
James West Alumni Center
Los Angeles, CA 90095-1397
Phone: **310-206-0613** Fax: **310-209-4271**
Email: **travel@alumni.ucla.edu**

UCLA Alumni Travel is a benefit of the UCLA Alumni Association Gold, Life or Blue Membership. Please select an option below:

I am currently a (circle one) Gold | Life* | Blue Member of the UCLA Alumni Association.

I have enclosed a check made payable to the UCLA Foundation for:

\$1,000 Gold Membership

\$100 Blue Membership

Detailed Alumni Association benefit information can be found at alumni.ucla.edu/benefits.

*The UCLA Alumni Travel benefit has been grandfathered in for existing Life Members. Life Membership is not currently available for purchase.

Full Legal Name (exactly as it appears on passport)

1) _____
Title First Middle Last Date of Birth

Email: _____

2) _____
Title First Middle Last Date of Birth

Email: _____

Street Address: _____

City: _____

State: _____ ZIP: _____

Home: (_____) _____ Cell: (_____) _____

Sharing with _____ (Form sent separately)

Name(s) you would like on your name badge(s):

(1) _____ (2) _____

I/we authorize you to make my/our reservations as follows:

Land Program and AHI FlexAir

I/we reserve the Land Program and request the round-trip AHI FlexAir to Paris, France, to depart from:

Departure City

Land Program

I/we will make my/our own air arrangements and transfers.

Single Accommodations

I prefer single accommodations (supplement waived, limited availability).

Reservations are subject to availability and processed on a first-come, first-served basis. Reservations to be paid in full by **March 30, 2020** (75 days prior to departure). Reservations received after this date must be accompanied by payment in full. Final payment may be made by personal check, MasterCard, Visa, Discover or Amex. Make checks payable to AHI Travel.

Enclosed is a deposit of _____ (\$600 per person required) to reserve _____ place(s).

Accept my check made payable to **AHI Travel**.

Charge my: MasterCard Visa Discover Amex

Card # _____

Expires _____ / _____

(Signature as it appears on credit card)

Please note: Any payment to AHI Travel constitutes your acceptance of the terms and conditions set out herein, including but not limited to the cancellation terms.