



AVA 2024 Crazy Horse Memorial Bus Tour Registration Form

May 30 – June 3, 2024 – RETURN THIS FORM WITH PAYMENT

Name: _____ Phone #: _____

Address/State/Zip Code: _____

Email: _____

Emergency Contact Name: _____ Phone #: _____

_____ Single Occupant in Room (King Bed) _____ 2 + Occupants in Room (Circle: King or 2 double beds)

If additional guests are staying in your room complete p.2.

Payment Policy – A 25% deposit is due at time of registration. The balance of the registration fee is due on **May 1st, 2024**. Beginning May 1st, registrants must pay in full at time of registration. Cancellations before April 30th, 2024 will receive a refund minus a \$50.00 service fee. No refunds will be given after May 1st, 2024. The American Volkssport Association (AVA) reserves the right to cancel without penalty. Should the AVA cancel the trip, all fees will be 100% refunded. All participants will be required to sign the AVA's Release of Liability Form.

Prices below include: 1 Bus ticket per person, 4 nights hotel stay with breakfast, 3 AVA sanctioned walks, and one box lunch on the bus trip from San Antonio to Colorado Springs.

Cost Per Person	# of People Per Room	Deposit Due at Registration Per Person	Total Due May 1 st , 2024 Total Per Person
\$995.00	One per room	\$250.00	745.00
\$743.00	Two per room	\$185.00	558.00
\$719.00	Three per room	\$180.00	539.00
\$677.00	Four per room	\$170.00	507.00

*Purchaser is responsible for all credit card fees.

Complete this form and mail with payment to:

American Volkssport Association

Attn: Erin Grosso

1008 South Alamo Street

San Antonio, Texas 78210

Or pay by credit card by calling Marian at (210) 659-2112.

For more information contact Erin at 210-659-2112 or erin@ava.org

Additional Travelers in Your Group Staying in Your Room

Your Name: _____

2. Guest Name: _____ Phone #: _____

Email: _____

Emergency Contact Name: _____ Phone #: _____

3. Guest Name: _____ Phone #: _____

Email: _____

Emergency Contact Name: _____ Phone #: _____

4. Guest Name: _____ Phone #: _____

Email: _____

Emergency Contact Name: _____ Phone #: _____