

Blue Lakes Charters & Tours

53 West Huron Street • Pontiac, Michigan 48342 • Phone 800-282-4287 • Fax 248-338-1773

Web site: www.bluelakes.com

136th "RUN FOR THE ROSES" IN LOUISVILLE, KY

KENTUCKY DERBY

April 30 - May 2, 2010



TOUR INCLUDES:

- Round trip motorcoach (non-smoking)
- **General Admission** to Churchill Downs (no seating)
(unopened beverages & small coolers are now allowed)
- 2 nights at the **Holiday Inn Riverfront** in Covington, KY,
with restaurant, lounge and in-room coffee maker
- Fee for round-trip **shuttle service** (Fairgrounds to track)
- **Two Full breakfasts** at the hotel.
- **Gambling at Hollywood Casino & \$7.00 Food Coupon**
- Taxes and gratuities for the above and Services of a Tour Director throughout

\$369.00 p.p. double
\$121.00 additional
for single supplement

RESERVATIONS & PAYMENTS: \$75.00 per person, non-refundable deposit will reserve your space. Final payment: March 17, 2010.

Cancellation Policy: From date of booking to 46 days prior to departure: \$50.00 p.p. From 45 to 16 days prior to departure: half the tour price p.p. 15 days or less prior to departure date: non-refundable.

Liability: In making the tour arrangements, Blue Lakes Charters & Tours acts only as an agent for accommodations, transportation, sightseeing, meals or other services for the tour concerned. By accepting this tour package, you agree that neither Blue Lakes Charters & Tours, nor any of its representatives shall be liable for any loss, injury, damage, delay, omission or any other irregularity to person/property in regard to travel whether coach or any other conveyance or in carrying out any of the components of the tour.

Trip Insurance: If interested in insurance please request an insurance form.

Clip and return with your check or credit card authorization to: **Blue Lakes Charters & Tours • 53 West Huron St. • Pontiac, MI 48342.**



SIGN RESERVATION FORM

Trip Name: **Kentucky Derby**

Price: **\$369.00**

Date: **April 30-May 2, 2010**

I/We have read the terms and conditions as stated in this brochure, receipt of which is acknowledged. I/We understand the details as described as well as the terms and conditions for deposits, cancellations and responsibilities of each party.

Signature: _____

Signature: _____

Name: _____

Roommate: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone: _____ Business Phone: _____

Phone: _____ Business Phone: _____

E-Mail address: _____

E-Mail address: _____

Charge: ↑ VI ↑ MC Card number: _____ Expiration Date: _____

Card holder's signature: _____ 3 digit Security Code: _____

Please send travel insurance form ↑ YES ↑ NO ↑ Smoking Room (requested, not guaranteed) ↑ Non-Smoking Room

↑ Deposit Payment (Amount enclosed) _____ ↑ Final Payment (Amount enclosed) _____

Casino Information needed to receive inventive: Birth Date: _____



11/20/09