

**PLEASE RETURN PROMPTLY TO: AAA CENTRAL PENN**  
Discoveries / AAA Travel  
P. O. Box 1354, Harrisburg, PA 17105-1354 - Fax: (717) 657-3547

Group #20021  
**FRIENDS OF THE RAILROAD MUSEUM**  
**OF PENNSYLVANIA**

**PLEASE TYPE OR PRINT LEGIBLY. PLEASE USE ONE FORM FOR EACH PASSENGER WITH A DIFFERENT ADDRESS/BILLING.**

All persons 18 years of age and older are required to sign the application. A parent or legal guardian should sign for those under 18.

**FRIENDS OF THE RAILROAD MUSEUM OF PENNSYLVANIA: HOLIDAY TRAINS RAMBLE - Saturday, December 4, 2021**

**ADDRESS** \_\_\_\_\_

Street City State Zip Code

**HOME PHONE** ( ) \_\_\_\_\_ **CELL PHONE** ( ) \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**NAME** (Legal Name as printed on ID) \_\_\_\_\_

PASSENGER #1

PASSENGER #2

Current Member: Friends of the Railroad Museum  
of Pennsylvania  Yes  No

Current Member: Friends of the Railroad Museum  
of Pennsylvania  Yes  No

Name for Tour Badge \_\_\_\_\_

**Physical Disabilities and/or Dietary Needs and Health Conditions.** Please keep in mind that there is considerable walking, standing, and doing stairs. For personal comfort, group participants who require assistance are advised to have a traveling companion who is capable of and totally responsible for providing assistance throughout the trip.

**LUNCH CHOICE:** Lunch will include choice of ham and cheese or turkey and cheese on roll with chips, fruit, and a water

Passenger #1:  Ham and Cheese

Passenger #2:  Ham and Cheese

Turkey and Cheese

Turkey and Cheese

**SPECIAL OCCASION** being celebrated on the trip (advise occasion and date) \_\_\_\_\_

**IN CASE OF EMERGENCY**, please notify:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work/Cell Phone ( ) \_\_\_\_\_

To the best of my/our knowledge, I am/we are in good state of health and suffering from no physical condition which might be detrimental to my/our own safety, comfort, and convenience and that of the other participants during the tour. If any participant named on this application HAS A SPECIFIC PHYSICAL CONDITION, DISABILITY, ALLERGY OR DIETARY REQUIREMENT THAT MAY REQUIRE SPECIAL ATTENTION OR TREATMENT, such details should be reported on this application. I/we have read and understand and agree to conditions as set forth in the tour brochure or flyer, especially those paragraphs relating to payments, cancellations, refunds and responsibilities of AAA Central Penn (as tour operator and/or agent for the participants).

**SIGNATURE(S)** #1 \_\_\_\_\_ #2 \_\_\_\_\_

**TRIP RATES PER PERSON: Friends of the Railroad Museum of Pennsylvania Current Members & Non-Members**

Current Member:  \$199.00

Non-Member:  \$209.00

**TRIP PAYMENT:** Full payment is due to AAA Central Penn at time of registration. Check, VISA or MasterCard accepted for group travel. Today's Date \_\_\_\_\_

**CHECK ENCLOSED**  (payable to AAA Central Penn) **OR CHARGE TO**  Total Amount Enclosed \$ \_\_\_\_\_

VISA/MasterCard (circle one) Account # \_\_\_\_\_ Exp Date \_\_\_\_\_

Cardholder Name As Shown On Card \_\_\_\_\_

Cardholder Signature \_\_\_\_\_ CVV# \_\_\_\_\_

(Three-digit number on reverse side of card)

**PLEASE COMPLETE PARKING WAIVER ON REVERSE**

**PARKING WAIVER**

I hereby release AAA Central Penn, the Lancaster Airport, the Friends of the Railroad Museum of Pennsylvania and all of their entities from any liability while my vehicle is parked in the Lancaster Airport parking lot.

Parking Location:

Lancaster Airport  
500 Airport Rd  
Lititz, PA 17543

Passenger Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Vehicle: Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License Number \_\_\_\_\_

Signature \_\_\_\_\_

**QUESTIONS**

Please visit or call a AAA Travel Agent at your choice of the AAA Central Penn offices listed below. This custom tour is arranged by AAA Central Penn.

CARLISLE (717) 243-1846  
GETTYSBURG (717) 334-1155  
HARRISBURG (717) 657-2244  
HERSHEY (717) 533-3381

HUNTINGDON (888) 222-3575  
LANCASTER (717) 898-6920  
LEBANON (717) 273-8534  
LEWISTOWN (888) 222-3575

LITITZ (717) 626-3040  
WEST SHORE (717) 761-8347

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