STEADY FOR LIFE TRAVEL RESERVATION

Name(s)_____

Street address_____Apt.#_____

City_____State_____ Zip Code_____

Email address_____Cell Phone no._____

Name of Trip_____ Date_____

Boarding Place (Please circle one): Mayfair Church of Christ OR Asbury United Methodist
1095 Carl T. Jones Dr., Huntsville 980 Hughes Rd., Madison

Accommodations (Please circle one): Single Twin Triple (All rooms are non-smoking)

Seatmate/Roommate_____

Form of Payment (Please circle one): Personal Check Cash Amt.:_____

Mail to: Steady for Life, 990 Gilstead Circle, Huntsville, AL 35802 OR

Drop off at the Steady for Life Studio, 7900 Bailey Cove Road on M/W/F – 9:00-12:00

STEADY FOR LIFE TRAVEL RESERVATION

Name(s)_____

Street address_____Apt.#_____

City_____State_____Zip Code_____

Email address_____Cell Phone no._____

Name of Trip_____ Date_____

Boarding Place (Please circle one): Mayfair Church of Christ Asbury United Methodist
1095 Carl T. Jones Dr., Huntsville 980 Hughes Rd., Madison

Accommodations (Please circle one): Single Twin Triple (All rooms are non-smoking)

Seatmate/Roommate_____

Form of Payment (Please circle one): Personal Check Cash Amt.:_____

Mail to: Steady for Life, 990 Gilstead Circle, Huntsville, AL 35802 OR

Drop off at the Steady for Life Studio, 7900 Bailey Cove Rd. Huntsville on M/W/F – 9:00-12:00