

# 2011 ALBUQUEQUE INTERNATIONAL BALLOON FIESTA GROUP TOUR / CHASERS CLUB UPGRADE

Please complete and submit with payment by September 3, 2011

TOUR COMPANY NAME: \_\_\_\_\_

GROUP NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**EVENTS**

**NUMBER OF GUESTS**

- |  |       |
|--|-------|
| <input type="checkbox"/> 10/1 - Morning Mass Ascension           | _____ |
| <input type="checkbox"/> 10/1 - Twilight Twinkle Glow            | _____ |
| <input type="checkbox"/> 10/2 - Morning Mass Ascension           | _____ |
| <input type="checkbox"/> 10/2 - Evening Balloon Glow             | _____ |
| <input type="checkbox"/> 10/3 - Morning Event/Flying Competition | _____ |
| <input type="checkbox"/> 10/4- Morning Event/Flying Competition  | _____ |
| <input type="checkbox"/> 10/5 - Morning Mass Ascension           | _____ |
| <input type="checkbox"/> 10/6 - Special Shape Ascension          | _____ |
| <input type="checkbox"/> 10/6 - Evening Special Shape Glowdeo    | _____ |
| <input type="checkbox"/> 10/7 -Special Shape Ascension           | _____ |
| <input type="checkbox"/> 10/7 - Evening Special Shape Glowdeo    | _____ |
| <input type="checkbox"/> 10/8 - Morning Mass Ascension           | _____ |
| <input type="checkbox"/> 10/8 - Night Magic Glow                 | _____ |
| <input type="checkbox"/> 10/9 – Morning Mass Ascension           | _____ |

TOTAL: \_\_\_\_\_ x \$10.00

AMOUNT DUE: \_\_\_\_\_

Mail form and Payment to:

AIBF

4401 Alameda Blvd NE

Albuquerque, NM 87113

[grouptours@balloonfiesta.com](mailto:grouptours@balloonfiesta.com)

Fax: 505-828-2887

Credit Card: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Visa \_\_\_\_\_ AMEX \_\_\_\_\_ MC \_\_\_\_\_

Signature: \_\_\_\_\_