

SILVER SLIPPER GROUP MANIFEST



Group Leader's Name: _____ Trip Date: _____

of Guests: _____ Bus Company: _____ Driver: _____

Please type each guest's name, address, city, state, ZIP, birthdate, and card number. **FULLY COMPLETED** manifests are due **7 days prior** to your trip. **No adds the day of your trip!** **Click SUBMIT on the last page of this form to complete submission.**

	Full Name	Street Address	City	State	ZIP	Birthdate	Card #
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	Full Name	Street Address	City	State	ZIP	Birthdate	Card #
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	Full Name	Street Address	City	State	ZIP	Birthdate	Card #
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