

**Circle your tour choice:**

History

Beer 1

Beer 2

Christmas

**MUST INCLUDE WITH YOUR COMPLETED REGISTRATION FORM:**

1) COPY OF YOUR PASSPORT PHOTO PAGE

2) COPY OF PROOF OF BEING FULLY VACCINATED AGAINST COVID-19

First Traveler \_\_\_\_\_

Nametag should read \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Second Traveler \_\_\_\_\_

Nametag should read \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

**Accommodations:**

\_\_\_\_ I wish to have a single room and will pay the single supplement fee.

\_\_\_\_ I wish to share a room with \_\_\_\_\_

Circle choice: Smoking Non-Smoking

Type of Room: Double (with 1 double bed) Twin double (with 2 twin beds) (Type of room not guaranteed)

\_\_\_\_ I wish to room with another person requesting a roommate. Please answer these questions:

Do you smoke? Yes No Do you mind if roommate smokes? Yes No

May we give your phone number to a prospective roommate? Yes No

Please note: If you request shared accommodations, but have not lined up a roommate, we will do our best to secure a roommate on a first-come, first-served basis. If a roommate is not available, you will be charged a single supplement fee.

Special events: (during tour i.e. anniversary, birthday) Event \_\_\_\_\_ Date \_\_\_\_\_

Special Diets: Requested for the following participant/s: \_\_\_\_\_

If you are a vegetarian, specify if you eat fish, shellfish, eggs, dairy \_\_\_\_\_

Allergies (food or other) \_\_\_\_\_

List any medical conditions, medications, and physical limitations (see "Tour Terms and Conditions"): \_\_\_\_\_

In case of an emergency, please notify:

Name \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

City and State \_\_\_\_\_

City and State \_\_\_\_\_

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**Please register by mail.**

- Final payment is preferred by check or money order. An invoice will be sent to you 120 days prior to tour start date.
- Full payment due 90 days before tour departure.

\_\_\_\_\_ I/We have already made my/our deposit to Vesterheim

\_\_\_\_\_ Enclosed is my/our deposit of \$ \_\_\_\_\_, which applies toward the total tour fee. (\$500/person deposit is required.)

\_\_\_\_\_ I/We are paying by check or money order. (Checks payable to: Vesterheim Museum.)

\_\_\_\_\_ I/We authorize the charge to: VISA    MASTERCARD    DISCOVER    AMERICAN EXPRESS

(Please note: if paid with a credit card, a fee will be applied —3.5% for Visa, Mastercard, Discover, and American Express  
This fee is not refundable and will not be applied to your final payment.)

Card holder's name (as it appears on card) \_\_\_\_\_

Expiration Date \_\_\_\_\_ Card number \_\_\_\_\_

Verification Code (3 digit number on back of card) \_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_ I have enclosed a photocopy of my passport photo page and proof of vaccination against COVID-19.

Can your name, address, and email be given to other participants traveling with the group?      Yes      No

May Vesterheim use photographs of you taken on this tour to promote its tour program?      Yes      No

How did you find out about this tour? \_\_\_\_\_

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**All parties traveling, please date and sign:**

I/we have read, understand, and agree to the "Tour Terms and Conditions," including the responsibility provisions. I/we understand that a valid passport is required for travel to any country outside of the United States. All of the persons named below certify they are fit to travel and are not traveling contrary to medical advice.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Please mail to:** Vesterheim Norwegian-American Museum  
Attn: Rolf Svanoe - Coordinator of Tours to Norway  
523 W Water St., Decorah IA 52101-0379

For more information, please call 563-382-9681, ext. 240, or e-mail [NorwayTours@vesterheim.org](mailto:NorwayTours@vesterheim.org).