

**Texas FCCLA  
National Leadership Conference  
Nashville, Tennessee  
July 01 - 07, 2017**

	Single	Double	Triple	Quad
Austin	\$1,897.00	\$1,332.00	\$1,144.00	\$1,050.00
D/FW	\$1,789.00	\$1,224.00	\$1,036.00	\$942.00
Houston San	\$1,821.00	\$1,256.00	\$1,068.00	\$974.00
Antonio Land	\$1,844.00	\$1,279.00	\$1,091.00	\$997.00
Only	\$1,430.00	\$865.00	\$677.00	\$583.00

MAIL TO:  
HOLIDAYS 'N TRAVEL  
3302 LIVE OAK CIRCLE  
AUSTIN, TX 78731  
ATTN: MANNY LINARES  
PHONE: 512-636-6539  
EMAIL: [manny@holidaysntravel.com](mailto:manny@holidaysntravel.com)  
Make check payable to: Holidays 'N Travel

Form must be to  
Holidays N Travel  
by  
**April 25, 2017**

- Package Includes:**  
 \*Round trip air fare from selected cities\*\*  
 \*Six nights at The Doubletree Nashville  
 \*Arrival transfers with Box Lunch, Discover Music City Tour including the Country Music Hall of Fame.  
 \*Dinner at The George Jones Museum 7 Complex  
 \*Departure transfers  
 \*Hotel taxes  
 \*FCCLA insurance  
 \*Texas pins  
 \*State t-shirt  
 \*All taxes for included items  
 \*Tour director from Holidays 'N Travel

\*Airtfares from other cities available by request  
 \*\*Airtfares are 100% non refundable

**Full payment must accompany this form.** Payment must be in the form of a check. No credit cards will be accepted for package tour payment. Request for roommates will be honored if at all possible but must accompany this form.

**All correspondence will be mailed to the adult sponsor.**  
 If more space is needed please copy this form.



Prices quoted are per person. All prices are estimated costs and may change. Prices quoted are for travel with the group and any deviations will incur an additional charge of \$50 per person in addition to any additional expense. Space is limited and will be on a first come, first serve basis. Once contracted Air space is full we will obtain the best possible airtfares for you. Cancellations received after May 15 will incur cancellation fees of no less than \$50.

**PLEASE TYPE OR PRINT TO COMPLETE THIS FORM**

Student Delegate	Home Address City/State/Zip	Home Phone (with area code)	M/F	Accom	Depart City	Pkg cost	Date of Birth	Sub Total	Less FCCLA	Total	T Shirt size
Advisor											

Chapter Advisor: \_\_\_\_\_ School: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

School Phone Number (including area code): (     ) EXT. (     ) Total Enclosed: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone Number (     ) \_\_\_\_\_