



FRIENDS of FLORENCE

**FEBRUARY 2018 FLORENCE PROGRAM**

*Donatello & Brunelleschi: A Renaissance of Inspiration and Competition*

Thursday, February 15<sup>th</sup> through Tuesday, February 20<sup>th</sup>

**RESERVATION FORM**

To make a reservation, please complete and return this form with your payment of the Program Cost of \$3,800 per person by December 15, 2017. This amount is not tax-deductible. Additionally, each participant is required to make a fully tax-deductible per-person contribution of \$2,000 to *Friends of Florence*.

Participants are responsible for their air travel arrangements to and from Florence, as well as hotel reservations and expenses in Florence. Ground transportation during the Program will be provided.

**FOR FURTHER DETAILS, PLEASE READ 'ITINERARY' AND 'TERMS & CONDITIONS.'**

Name #1: \_\_\_\_\_  
(In full, as it appears on passport)

Name #2: \_\_\_\_\_  
(In full, as it appears on passport)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

Arrival Date in Florence: \_\_\_\_\_ Fax: \_\_\_\_\_

Please charge \$\_\_\_\_\_ to my  Visa  MasterCard  American Express.

The billing address for this card is the same as my mailing address above.

Card Number: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

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

Card Billing Address: \_\_\_\_\_  
(If different from your mailing address above)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I confirm that I have read the information contained in the attachment, 'TERMS AND CONDITIONS,' pertaining to refunds, general conditions, and the Responsibility Clause, and understand that full payment – including the \$2,000 per-person contribution portion – is due by December 15, 2017.

Signatures: \_\_\_\_\_ & \_\_\_\_\_ Date: \_\_\_\_\_

By December 15, 2017, please complete and return with your \$3,800 per-person Program fee and the fully tax-deductible per-person contribution of \$2,000 cost to:

*Friends of Florence*  
4545 W Street, N.W. Washington, DC 20007  
Tel: 202.333.3705 Fax: 202.333.4046  
renee@friendsofflorence.org

Checks are preferred and should be made payable to 'Friends of Florence.' For security purposes we are unable to accept credit card information via email. If you would like to pay with a credit card, please return this completed reservation form to us via fax (202.333.4046) or mail.