



GROUP INQUIRY FORM

Yes, I am interested in information/assistance with planning a group travel or special occasion event.

Group Leader Name:

Group Name:

Travel Dates:

Contact Information:

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

ESTMATED TOTAL NUMBER OF PERSONS TRAVELING (including Infants and Children): _____

TYPE OF TRAVEL GROUP (please check all that apply):

Family Cruise _____

Cruise Celebrations at Sea _____

Seminars at Sea _____

Destination Weddings _____

Reunions and Retreats _____

Mother/Daughter Getaways _____

Destination Bachelorette Parties _____

Other _____

Please return to:

Leisuretime Travel LLC

The Marquette Building
243 West Congress Street
Suite 350

Detroit, Michigan 48226
Telephone ~ 313.706-7219

KATHRYN AYALA

Email: leisuretimeTRAV@aol.com

FAX TO: 305.816.6643