



Group Tour Planning

Request for Proposal Form

First Name: _____ Last Name: _____

Organization: _____ Title: _____

Address: _____

City: _____ State/Province/Country: _____ Postal Code: _____

Email Address: _____

Phone: _____ Fax: _____

Preferred Contact Method: Email: _____ Fax: _____ Phone: _____ Best time: _____ a.m./p.m.

Preferred Dates: _____ Number of Rooms Required: _____

Dates for Lodging: Sun _____ Mon _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat _____

Type of Event: ___ Group Tour ___ Senior ___ Student ___ Families

Interests:

- | | |
|---|--|
| <input type="checkbox"/> Museums/Art | <input type="checkbox"/> Educational |
| <input type="checkbox"/> Shopping | <input type="checkbox"/> Entertainment |
| <input type="checkbox"/> Restaurants | <input type="checkbox"/> Boating/Fishing |
| <input type="checkbox"/> Outdoor Activities | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Beach/Lighthouses | |

Comments:

Please send completed RFP to:
Bernadette Benkert, Sales Executive
Visit Muskegon
610 W. Western Ave., Muskegon, MI 49440

Phone: 231-724-1123 or 800-250-9283
Fax: 231-724-1398
bernadette@visitmuskegon.org
www.visitmuskegon.org