

Please sign me up for the Copenhagen Opera Adventure!

Name(s)

Address

City, State, Zip

Phone

Email

Please indicate your choice:  
single room

double room

sharing with (if submitting a separate form):

I prefer:

One king-size bed

Two queen-size beds

I require a handicap accessible room.

yes          no

Special dietary considerations:

I am enclosing a deposit of:

\$725.00 per person (double) or \$875 (single)

**Please make the check payable to Lawrence Axelrod and mail to:  
Lawrence Axelrod  
5445 N. Sheridan Rd. #1212  
Chicago, IL 60640**