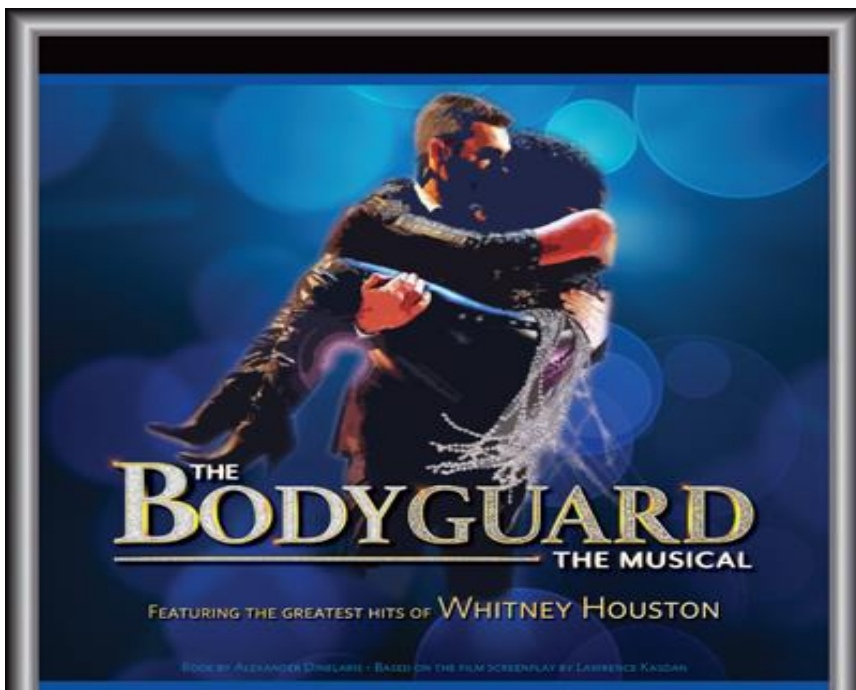




**Friday  
Sept. 27, 2019**

**Cost:  
\$98 per person**



***This Special Event & Package Includes:***

**Round Trip Luxury Motor Coach, THE BODYGUARD "LIVE"  
Dinner, Show, Taxes & Tipping!**

**Motor Coach Departs promptly at 4:15PM - Boarding starts at 3:45PM,  
for Columbia Md. / Return approx. 11:30PM  
Oxon Hill Md., Park & Ride  
6600 Oxon Hill Road, Oxon Hill, MD. 20745**

**Buffet Dinner: 6-7:30pm (Special beverage orders at own expense)  
Dinner Menu will be presented after final payment date.  
Show starts at: 8:00pm**

**\*\*\* Northern PG Pickup TBD \*\*\* (10 passenger minimum)  
I-95, Exit 27, College Park-P&R**

**Booking Code: CSTBG9/19**

*The Bodyguard: Based on the Warner Brothers film starring Whitney Houston and Kevin Costner, The Bodyguard features a score filled with Ms. Houston's greatest hits including: "I Will Always Love You," "I'm Every Woman," "Saving All My Love," "How Will I Know," "I Wanna Dance With Somebody," "So Emotional," "One Moment in Time"...the list of hit songs goes on and on!*

*Former Secret Service agent Frank Farmer is hired to protect superstar Rachel Marron from an unknown stalker. Each expects to be in charge – what they don't expect is to fall in love.*

**Note: Fog, haze and strobe effects may be used in this production.**

**Terms Per Person:**

**Initial Nonrefundable Deposit of \$25 per person is due at booking. Full and Final Payment is Due July 27, 2019!  
All sales are final and under 100% Penalty at purchase, however you are allowed to transfer only with a replacement name \* Forms of payment accepted: Certified Check, Personal Check, Money Order or Credit Card (CC add a 3% processing fee)**

.....

Name: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ BK Code: CSTBG9/19  
Payable to: Champion Services Travel (CST)  
PO Box 44140, FT. Washington, MD 20744

Address: \_\_\_\_\_ # of travelers depositing for? \_\_\_\_\_ Deposit amount: \$ \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Under 16 not allowed on this booking: \_\_\_\_\_

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Special Needs \_\_\_\_\_

E-mail: \_\_\_\_\_ Credit Card #: \_\_\_\_\_ SC \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Name on CC: \_\_\_\_\_ Signature: \_\_\_\_\_  
Add 3% processing fee

Travel Partner/s: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Celebrating Something? \_\_\_\_\_ Are you a first time CST Traveler: Yes \_\_\_\_\_ No \_\_\_\_\_