

**Shaklee Corporation
Optional Tour Order Form**

**Advance Registration Deadline
is July 29, 2009**

**If you have questions please call
(314) 727-2400**

**PLEASE RETURN TO:
Destination St. Louis, Inc.
7710 Big Bend Blvd.
St. Louis, MO 63119**

Or by Fax: 314-727-2227

**Or register online:
www.destinationstlouis.com/shaklee.htm**

TERMS AND CONDITIONS:

Tours depart from America’s Center–Washington Avenue Entrance. Tickets will be held for pickup at the Tour Desk in the Registration Area. Tickets will not be distributed by mail.

Tour Desk Hours:

Wednesday, August 5, 2009: 9:00 am to 6:00 pm

Thursday, August 6, 2009: 12:00 pm to 3:00 pm

Friday, August 7, 2009: 1:00 pm to 4:00 pm

Make checks payable to Destination St. Louis, Inc.

*Tickets will be sold on-site, space permitting, and an additional \$3.00 per ticket will be added.

*Destination St. Louis, Inc. reserves the right to cancel a tour if a minimum number of participants is not met or if an attraction becomes unavailable for reasons beyond its control.

*Payments will be refunded by mail if a tour is sold out/ canceled. Advance reservations must be received by July 29, 2009.

*Cancellations by attendees will be charged a \$5.00 processing fee.

	Tour Name	Date and Time	Cost	# of tickets	Total
1.	Gateway to St. Louis Introductory Tour	Wed, Aug 5, 2009 1:00pm—5:00pm	@ \$47.00 each		
2.	The Anheuser-Busch Brewery & Ted Drewes	Wed, Aug 5, 2009 1:00pm—5:00pm	@ \$34.00 each		
3.	Forest Park - “Meet Me in St. Louis”	Wed, Aug 5, 2009 1:00pm—5:30pm	@ \$33.00 each		
4.	Historic St. Louis Progressive Dine-Around	Wed, Aug 5, 2009 6:00pm—11:00pm	@ \$99.00 each		
5.	The Anheuser-Busch Brewery & Ted Drewes	Sat, Aug 8, 2009 1:00pm—5:00pm	@ \$34.00 each		
6.	Beautiful Blooms & Historic Homes	Sat, Aug 8, 2009 1:00pm—5:00pm	@ \$54.00 each		
7.	Forest Park - “Meet Me in St. Louis”	Sat, Aug 8, 2009 1:00pm—5:30pm	@ \$33.00 each		

Total Amount Due: _____

SPECIAL NEEDS: If you have a disability or special dietary needs that may influence your participation in the Tour Program, please attach a written description of your disability/diet-related needs to your registration form. We cannot assure the availability of appropriate accommodations without prior notification of need.

*Prices quoted reflect a 4% cash/check discount. The 4% cash/check discount will be added back to amount (s) paid by credit card.

Name: _____

Payment Method: Check # _____ Credit Card

Address: _____

MC/VISA/AMEX/Discover # _____

City: _____ **State:** _____ **Zip:** _____

Expiration Date: _____ Security Code: _____

Email: _____

Signature: _____

Daytime Phone #:(_____) _____