## **Leisure Travel Services 2025**

MEMORANDUM FOR RECORD:

SUBJECT: Ticket Order Form

**FEDEX** 

PLEASE PRINT CLEARLY			_			_			
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First Name:	Last	Rank/Status:
Email Address:		_ Phone #:
Address:		Date of park arrival
By submitting this request ye	ou certify the above information is true	and that you are currently ACTIVE DUTY,
MILITARY RETIRED, RESEVE	RIST, 100% DISABLED, current SPOUSE	, (DOD Employee not eligible for Military Salute ).
ID Card required to pick up	Tickets. Disney/Universal tickets will b	e emailed to you, you do not need to come pick
them up.		
Please fill in the below infor	mation and email form to	
usarmy.bragg.usag.mb	ox.dfmwr-tickets-mtp@army.mil (0	Copy & Paste)
once we receive the form we	will call you to verify the tickets you wa	ant, the price and get your credit card information.
No tickets will be printed un	til payment is made.	
TICKE	TS are NON-REFUN	DABLE
	Leisure Travel is not responsible	le for lost or stolen tickets
I confirm that I am the eligib above.	le ID card holder and authorize Leisure	Travel to charge my credit card for the amount listed

We will call you form payment when we are ready to process you can come by and pick up your tickets

The next business day. If you want them **fedex** to you there will a \$25.00 fee.

<mark>ID Card</mark>	
<b>Holders</b>	
Names:	

Date:	
Date.	

TIC	KET	<b>NAME</b>	(example: Legoland	FL.)
	NEI	INAIVIE	•(example: Legoland	FI.)

## Name of guest using ticket, AGE **Price** PLEASE PRINT CLEARLY USING BLOCK LETTERS (Child is usually 3-9) Example: JANE JONES <mark>32</mark>

19 20		
First Name:	Last	Rank/Status:
Email Address:		Phone #: