# Grand Central Terminal Tour Order Form

**Please send your order in by March 1, 2014. Any orders received after that will be filled on a space available basis.**

**REGISTRATION INFORMATION**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____

Cell Phone (optional): _____ Email address: _____

**It is important that you provide phone number(s) and email in case we need to reach you.**

**YOUR ORDER:**

| | | | QTY |
|---|---|---|---|
| _____ | Grand Central Terminal Tour | Sat. April 5 | $25 each: _____ |
| | | | TOTAL _____ |

**Mail Coupon To:**

Electric Railroaders' Association Inc.

C/O Robert Colorafi
1714 Dahill Road
Brooklyn, NY 11223

**To Pay by Check:** Make check payable to "E.R.A"
**To Pay by Credit Card:** Select Credit Card: ☐ Visa ☐ MasterCard ☐ Discover

Print your name in CAPITAL LETTERS exactly as it appears on your credit card

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Credit Card Number ☐☐☐☐-☐☐☐☐-☐☐☐☐-☐☐☐☐

Expiration Date (mm/yy) ☐☐/☐☐

CVV Number ☐☐☐

The CVV number is the rightmost 3 digits on the BACK of your credit card