



Go...With Jo! Tours & Travels

We Take Care of You!

www.gowithjo.com

910 Dixieland Rd
Harlingen TX 78552

4313 N 10th #D3
McAllen TX 78504

Trip: _____
Date: _____

Hi,
I would appreciate very much if you complete this questionnaire and return it to me. Your opinions & suggestions are sincerely welcomed and will be thoroughly considered for future trips.

General Impression of Tour _____

Suggestions _____

TOUR ESCORT: _____

LOCAL GUIDES: _____

BUSES: _____

Bus _____

Driver _____

Hotels: (if used)

Location _____

Rooms _____

Food _____

Service _____

If you wish to be on our Mailing List please complete the following:
(we periodically drop names if we do not hear from you).

Name _____

Winter address _____

City _____

State _____ Zip _____ Phone(_____) _____

Summer address _____

City _____

State _____ Zip _____ Phone(_____) _____

Email address _____

I selected this tour because:

_____ Friends recommendation

_____ Travel Agent recommendation

_____ Newspaper advertisement

_____ I like your brochure/itinerary

_____ I have been with you before

_____ Website

_____ Other _____