



Reservation Form

ALL FIELDS ARE REQUIRED - One form per room. Must use legal names as they appear on your Government Issued Identification. A current passport valid for 6 months from trip return date will be required for International Tours and Cruises outside of the 50 US States.

Name: _____ D.O.B. _____ Gender: M or F (circle one)

Address: _____

Citizenship: _____ Phone: _____

Email: _____

Emergency Contact: _____ Relation: _____ Phone _____

Passport Number (if applicable): _____ Issue Date: _____ Expiration _____

Name: _____ D.O.B. _____ Gender: M or F (circle one)

Address: _____

Citizenship: _____ Phone: _____

Email: _____

Emergency Contact: _____ Relation: _____ Phone _____

Passport Number (if applicable): _____ Issue Date: _____ Expiration _____

Special Requests/Needs: _____

All Reservation Forms must be accompanied by a deposit.

Traveling with (Group Name) _____

Tour Name: _____ Dates: _____

Trip Cost & Deposit Amounts are listed on this tour's advertisement.

Cost of Trip: _____ or Deposit Amount you are sending: _____

Cruise Cabin Category or Special Requests: _____

Number of people I am paying for? _____ Check enclosed in the amount of: _____

By signing below, I verify that all information provided on this form is correct including my legal name according to a Government issued form of identification. I understand there may be additional fees imposed or I may not be eligible to participate in this tour if any of the above information is incorrect or results in a change. The information provided will be used for a reservation on this tour only.

Passenger Signature (required): _____ Date: _____