

Please read the all-inclusive tour features and conditions. Then complete this handy form. Book early!
MAKE CHECKS PAYABLE TO: TRAVEL LEADERS-TRAVEL CENTER

MAIL CHECKS TO:

Mrs. Kathleen Tansey
 TRAVEL CENTER, INC.
 20825 142nd Avenue SE
 Kent, WA 98042
 Tel: (253) 630-7755
 (800) 982-4442
 Email: KathleenTansey@TRAVELCENTER4U.com

Accommodation desired:

Double Room (sharing w/_____)

Single Room (\$700 extra per person)

Enclosed is my check for \$_____ as deposit (\$1,000 per person)

Passenger #1 *Clearly print your full name (last/first/middle) as it appears on your passport*

Name: Last: _____

First: _____

Middle: _____ Gender: Please check Male Female

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Bus. Phone: _____

E-mail address: _____

Passport #: _____ Date Issued: _____

(mm/dd/yyyy)

Date Expires: _____ Date of Birth _____

(mm/dd/yyyy)

(mm/dd/yyyy)

Place of Birth: _____ Country of Citizenship: _____

(city/state)

Passenger #2 *Clearly print your full name (last/first/middle) as it appears on your passport*

Name: Last: _____

First: _____

Middle: _____ Gender: Please check Male Female

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Bus. Phone: _____

E-mail address: _____

Passport #: _____ Date Issued: _____

(mm/dd/yyyy)

Date Expires: _____ Date of Birth _____

(mm/dd/yyyy)

(mm/dd/yyyy)

Place of Birth: _____ Country of Citizenship: _____

(city/state)

****Please provide a clear photocopy of your passport by final payment****