



Registration Form

Tour to Netherlands, Germany, Belgium, Luxemburg, France, Switzerland & Italy

Last Name..... First Name
(exactly as in your passport) (exactly as in your passport)

Address.....

.....Postal code.....

Tel. No. - Home:Business:

Cell: E-mail

Do you wish to purchase insurance? Yes..... No, I decline

Date of birth: Day: Month:Year:

I wish to share with: I request a single room (\$900) - Yes/No

Emergency contact: Name..... Phone No.

I read and accept the tour terms and condition.....
(Date) Signature

Please make sure your passport is valid at least 6 months beyond return date

Deposit of \$300.00 per person plus insurance (if desired), must accompany each registration.

- Please make cheque payable to International Heritage Tours.
Mail to: Alex, International Heritage Tours, 7117 Bathurst St., Suite 200,
Thornhill, ON, L4J 2J6
- Or pay by credit card: Visa/Master Card/Amex (please circle)
No:

Expiry Date:/..... CSC..... Name of card holder:

Signature of authorized card holder: