

Tour: _____

Departure Date: _____

Group Name: _____

Group Number: _____



For Reservations Contact: _____

IMPORTANT: Please print your name EXACTLY as it appears on Real ID or Passport. Name corrections, after final payment due date or after tickets have been issued, will result in additional fees being assessed.

YOUR INFORMATION

Salutation: ____ First: _____ Middle: _____ Last: _____ Suffix: ____ Nickname: _____
(Mr., Mrs., Rev) (Print your name EXACTLY as it appears on your REAL ID or PASSPORT) (Jr., Sr.)
Address: _____ City: _____ State: _____ Zip Code: _____
Phone: _____ Cell: _____ Email Address: _____
Date of Birth: _____ Gender: Male Female Global Entry/TSA #: _____
Emergency Contact: _____ Relationship: _____ Phone: _____
Please provide contact information of person not traveling with you.

ROOMING WITH

Salutation: ____ First: _____ Middle: _____ Last: _____ Suffix: ____ Nickname: _____
(Mr., Mrs., Rev) (Print your name EXACTLY as it appears on your REAL ID or PASSPORT) (Jr., Sr.)
Address: _____ City: _____ State: _____ Zip Code: _____
Phone: _____ Cell: _____ Email Address: _____
Date of Birth: _____ Gender: Male Female Global Entry/TSA #: _____
Emergency Contact: _____ Relationship: _____ Phone: _____
Please provide contact information of person not traveling with you.

Please advise your departure airport for this tour: _____ Mayflower Air Writing Own Air

PAYMENT INFORMATION

Make Checks Payable To: _____
Mail Deposit To: _____

Mail Final Payment To: _____

Credit Card #: _____
Security Code: _____ Exp. Date: _____
Cardholder Name & Billing Address:

____ Single ____ Twin ____ Guaranteed Share
 One Bed Two Beds
Purchasing Travelers Protection Plan:
 Yes No
Deposit Amount: \$ _____
Travel Protection Plan: \$ _____
Total Amount Enclosed: \$ _____
Final Payment Due By: _____