



**ASIAN PACIFIC
ADVENTURES**

RESERVATION FORM

Asian Pacific Adventures
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PLEASE PRINT ALL INFORMATION

(PLEASE MAIL A PHOTOCOPY OF THE FACE PAGE OF YOUR PASSPORT WITH THIS APPLICATION)

TRAVELER # 1

TOUR NAME & DATE:.....
NAME AS IN PASSPORT:.....
ADDRESS:
CITY:.....ST:.....ZIP.....
PHONE (H).....(W).....
FAX:E-MAIL:.....
BIRTHPLACE:.....DATE OF BIRTH:.....
CITIZENSHIP:.....AGE:.....
PASSPORT NO:VALID UNTIL:.....
PLACE OF ISSUE:.....DATE OF ISSUE:.....
OCCUPATION:
HEIGHT.....WEIGHT.....

PLEASE CIRCLE ALL THAT APPLY

NON SMOKER SMOKER MALE FEMALE
VEGETARIAN SINGLE SHARE
FATHER'S NAME (FOR IRAN ONLY):.....

TRAVELER # 2

TOUR NAME & DATE:.....
NAME AS IN PASSPORT:.....
ADDRESS:
CITY:.....STATE:.....ZIP.....
PHONE (H).....(W).....
FAX:E-MAIL:.....
BIRTHPLACE:.....DATE OF BIRTH:.....
CITIZENSHIP:.....AGE:.....
PASSPORT NO:VALID UNTIL:.....
PLACE OF ISSUE:.....DATE OF ISSUE:.....
OCCUPATION:
HEIGHT.....WEIGHT.....

PLEASE CIRCLE ALL THAT APPLY

NON SMOKER SMOKER MALE FEMALE
VEGETARIAN SINGLE SHARE
FATHER'S NAME (FOR IRAN ONLY):.....

AIR TRAVEL:

MAKE AIR RESERVATIONS FROM.....
AIRLINE PREFERENCE:.....
FREQUENT FLIER NO.....
FREQUENT FLIER NO.....

EMERGENCY CONTACT WHILE ABROAD

NAME.....
RELATION.....
ADDRESS.....
PHONE (WORK).....
(HOME).....

HOW DID YOU HEAR ABOUT US?

.....
.....

I/We have read, understand, and agree to the general
information, terms and conditions set forth in
THE ASIAN PACIFIC ADVENTURES brochure

SIGNATURE.....DATE.....

SIGNATURE.....DATE.....

SEND FINAL DOCUMENTS TO:

NAME.....
C/O.....
ADDRESS.....
.....SUITE.....
PHONE.....

(SOMEONE MUST BE PRESENT TO RECEIVE IT)