

RESERVATION APPLICATION – STUDENT & ADULT TOURS

DEWITT HIGH SCHOOL 2022 EUROPE CONCERT TOUR

- A. To request space, each person traveling must complete and sign his/her own Reservation Application. (A duplicate form is provided on the reverse and you may also make copies of this form for additional passengers).
- B. Send the completed/signed Reservation Application and \$100 per person, by May 12, 2021, to:
IMAGE TOURS INC (DHS), 2828 KRAFT AVE SE, GRAND RAPIDS MI 49512 or dhs@imagetours.com
- C. Type or print the information requested on this application. (Put a check mark in the boxes that apply to you)
- D. To make sure you receive your documents, the address required is your mailing address. Please notify Image Tours if your address should change between the time of booking and the departure date.
- E. List your name **exactly** as it appears or will be requested to appear on your **passport**.
- F. Yes, we do need a middle name or initial (exactly as stated on passport) and “Date of Birth” for each participant.

STUDENT TOUR /ADULT TOUR FEMALE /MALE LAND ONLY /LAND & AIR

NAME OF TRAVELER: _____ / _____ / _____
(Title) (First Name) (Middle) (Last Name)

ADDRESS: _____ / _____ / _____
(No. & Street) (City) (State) (Zip)

PH: _____ / _____ / _____ EMAIL: _____
(AC) (Home) (Alternate)

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____ CITIZENSHIP: _____
(Mth) (Day) (Yr) (State and/or Country) (Country)

DIET REQUEST (see “May I request Special Diet Meals?” in the FAQ Section): _____

ONLY FILL OUT THE INFORMATION WITHIN THIS BOX IF YOU ARE ON THE ADULT TOUR

NAME OF ROOMMATE: _____

NAME OF TRAVELING COMPANION(S): (If applicable) _____

SINGLE TRAVELERS ONLY (\$900 single room supplement): If you do not wish to have a roommate, check this box .
 If you are a non-smoker and would like to be on the list of passengers looking for a roommate, please check this box
 Please note that if you check the box to be put on the roommate list, you are providing Image Tours permission to give out your phone number and email address to prospective roommates. We do not guarantee roommates for this tour (see “Are Single Rooms or assistance finding a Roommate offered for the Adult Tour?” paragraph in the “FAQ”).

Enclosed is my check for \$ _____ made payable to IMAGE TOURS INC.

Please charge \$ _____ to my Discover/Visa/Mastercard Account #: _____ CVC: _____

Exp. Date: _____ Billing Address if different than above: _____

Name of Card Holder: _____ Card Holder Signature: _____

Please charge \$ _____ as an ACH from my Bank Checking Account #: _____ Routing #: _____

Name on Account: _____ Name/Address of Bank: _____

Name of Authorized Signer: _____ Authorized Signature: _____

I have read the brochure pertaining to this tour, including “Answers to Frequently Asked Questions” and the “Tour Contract”, and I understand and accept its contents.

SIGNATURE OF PERSON TRAVELING: _____

Sign full name as it appears/will appear in your passport. If person traveling is under the age of 18, legal guardian must also sign:

SIGNATURE OF LEGAL GUARDIAN: _____

PRINT NAME: _____ PH: _____ EMAIL: _____

IMAGE TOURS, INC (DHS), 2828 KRAFT AVE SE, GRAND RAPIDS MI 49512
Ph: 1-800-968-9161 x2290 Fax: 616-957-2610 Email: dhs@imagetours.com