

# MANGA TOUR RESERVATION FORM 2011

PLEASE COMPLETE IN BLOCK CAPITALS

## CONTACT DETAILS OF LEAD PASSENGER

Name _____	Daytime Tel _____
Address _____	Home Tel _____
_____ Postcode _____	Email Address _____

## PASSENGER DETAILS (as on passport)

Title	Forename	Surname	D.o.B.	Nationality	Passport No.

## CONTACT DETAILS FOR NEXT OF KIN (NOT TRAVELLING) IN THE EVENT OF AN EMERGENCY

Name _____	Relationship _____
Address _____	Daytime Tel _____
_____ Postcode _____	Home Tel _____

## DIETARY REQUIREMENTS

Please let us know if you have any specific dietary requirements. Whilst we will be able to accommodate your requests in-flight, there is no guarantee of this whilst on tour.

Vegetarian    Vegan    Kosher    Halal    Other (please specify) \_\_\_\_\_

## FLIGHT UPGRADE

(We will contact you with further information upon receipt of your reservation form)

Business Class

First Class

## REGIONAL FLIGHT CONNECTION

Please specify Regional Airport: \_\_\_\_\_ Price will be confirmed

## TRAVEL INSURANCE

Details of Japan Journeys travel insurance policy are on our website. All passengers should visit the links page on our website to obtain a quote. We recommend you select the best coverage possible i.e. **Platinum protection**. If you do not take out insurance through us, please supply details of your alternative insurance in the space below.

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Emergency Assistance Company \_\_\_\_\_ Telephone Number \_\_\_\_\_

## PAYMENT DETAILS

Payment Details	Amount	No.	Total
DEPOSIT per person	£142.50		
INSURANCE (available from our website) <b>not available to non UK residents</b>			
SINGLE ROOM SUPPLEMENT	£180.00		
PRE OR POST TOUR ADDITIONAL NIGHTS TOKYO/KYOTO	pp: £45 (twin), £65 (single)		
Please indicate TWIN or DOUBLE room (if sharing)			
TOTAL REMITTANCE Cheque or credit/ debit card			

I wish to pay by: (tick box)

Mastercard  Visa  Switch\*  Delta  Cheque  \*Switch Issue No. \_\_\_\_\_

Card No. \_\_\_\_\_

Issue Date: \_\_/\_\_/\_\_    Expiry Date: \_\_/\_\_/\_\_    Cardholder's Name: \_\_\_\_\_

Security No. \_\_\_\_\_

N.B. Credit Card payments are subject to a 1.5% administration charge.

On behalf of all named persons on this Reservation Form, I accept the Booking Conditions, general information, insurance conditions and all information enclosed/attached.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Total enclosed: £ \_\_\_\_\_

Send Completed Booking Form to:

**Japan Journeys Limited**, Cameo House, 11 Bear Street, London WC2H 7AS, United Kingdom  
Tel: +44 (0) 20 7766 5267    Fax: +44 (0) 20 7766 5268    Email: [info@japanjourneys.co.uk](mailto:info@japanjourneys.co.uk)