

# MANGA TOUR RESERVATION FORM 2012

## BLOCK CAPITALS PLEASE

Contact Details of Lead Passenger	
Name _____	Daytime Tel _____
Address _____	Home Tel _____
_____ Postcode _____	Email Address _____

PASSENGER DETAILS					
Title	Forename (as on passport)	Surname (as on passport)	D.o.B.	Nationality	Passport No.

Contact Details for Next of Kin ( <u>not</u> 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
Halal	Kosher
Other (Please Specify)	

## 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 (10% of Tour Cost)/(Land only Deposit)	£159.50/£89.5		
INSURANCE (available from our website) <b>not available to non UK residents</b>			
SINGLE ROOM SUPPLEMENT	£180.00		
ROOM TYPE REQUEST IF SHARING (delete as appropriate)	Twin/Double		
EXTENSION PACKAGE (for Twin share or Single room basis)	£825.00/£950.00		
TRIP EXTENSION - ADDITIONAL NIGHTS IN TOKYO OR IN KYOTO	£49 pp in a Twin room £68 pp in a Single room		
TOTAL REMITTANCE Cheque or credit/ debit card			

I wish to pay by: (tick box)

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

Card No.											
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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: £ _____
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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)