

# EXQUISITE JAPAN TOUR RESERVATION FORM 2019

## BLOCK CAPITALS PLEASE

### Contact Details of Lead Passenger

Name \_\_\_\_\_ Daytime Tel \_\_\_\_\_  
 Address \_\_\_\_\_ Home Tel \_\_\_\_\_  
 \_\_\_\_\_ Postcode \_\_\_\_\_ Email Address \_\_\_\_\_

### PASSENGER DETAILS

Title	Forename(s) (as on passport)	Surname (as on passport)	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  Lacto-Ovo Vegetarian  Pescatarian  Vegan  Kosher  Halal  Other (please specify) \_\_\_\_\_

### HEALTH & FITNESS

Do any of the above suffer from any disability/medical condition that may affect your holiday arrangements? Yes  No

Do any of the above have walking difficulties or mobility restrictions? Yes  No

If the answer is YES to either of the above questions please provide further details below.

### 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	£300.00		
INSURANCE (available from our website) Not available to non UK residents			
SINGLE ROOM SUPPLEMENT	£425.00		
ROOM TYPE REQUEST IF SHARING (delete as appropriate)	Twin/Double (if sharing)		
PRE-TOUR ADDITIONAL NIGHTS IN TOKYO	£141.00 pp pp in a Twin room £159.00 pp in a Single room		
POST TOUR ADDITIONAL NIGHTS IN KYOTO	£125.00 pp pp in a Twin room £139.00 pp in a Single room		
<b>TOTAL REMITTANCE</b>			

I wish to pay by: (tick box)

Mastercard  Visa  Visa Debit  Cheque

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

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

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

On behalf of all named persons on this Reservation Form, I accept the Booking Conditions\*, general information, insurance conditions and all information enclosed/attached. (\*available for viewing at [www.japanjourneys.co.uk](http://www.japanjourneys.co.uk)).

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)