

**Tour Application Form
Concord/Kitakami Sister-City tour
October 2-12, 2009**

(NOTE: Submitting information together assumes that you will share a room during your travels.)



Mr/Mrs/Ms _____
(Print name as it appears in Passport)

Mr/Mrs/Ms _____
(Print name as it appears in Passport)

Address: _____

City: _____ State: _____ Zip _____

E-Mail Address: _____

Airline Mileage #s: (JAL or American): _____

Phone: Daytime (_____) _____

Evening (_____) _____

I/We are interesting in the Travel Protection: () yes () no (The Travel Agency will send this information upon request.)

I/We have a valid U.S. Passport () yes () no

If not, visit U.S. Passport Website: http://travel.state.gov/passport/passport_1738_2.html

For our travel documentation purposes, please attach a photo copy of the information page of your Passport, the page with your picture on it.

Emergency Contact: _____ (Name) _____ (Relationship)

Emergency Contact's Telephone No. (_____) _____

I/We will return with the Tour Group on October 12, 2009 () yes () no

I/We wish to return on _____

I/We are interested in Pre/Post Tour arrangements: () yes () no

(If you are interested in modifying your travel with us, you will be contacted by the Travel Agency)

A deposit of \$300.00 per person is enclosed. () yes () no

Balance will be paid by July 27, 2009. () yes () no

I/We, by signature below, accept the General Conditions set forth for this tour.

Signature: _____ Date: _____

Signature: _____ Date: _____

Please send application & deposit to: Polaris Tours
4415 Cowell Road, Suite 110
Concord, CA 94518
(925) 687-4995



www.concordambassadors.org

(925) 671-3495

REMINDER: Don't forget to attach a photocopy of your Passport.