

**JEWISH HISTORY STUDY TOUR
CES/JDS PARENTS TRIP
Poland and Czech Republic Tour
JULY 12-21, 2009**

TOUR APPLICATION

TRAVELER INFORMATION (First and last names must be exactly as they appear on passport).

Last Name	First Name	Passport #	Date Expires	Place Issued
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

CONTACT INFORMATION

Primary Phone: _____ Secondary Phone: _____
Primary Email: _____ Secondary Email: _____
Address: _____ City: _____ State/Zip: _____
Emergency Contact: _____ Relationship: _____
Primary Phone: _____ Secondary Phone: _____
Address: _____ City: _____ State/Zip: _____

RESERVATIONS

AIR: Please contact me to make air arrangements. Group travel airfares will be available Late August.
 I have arranged my own air. Flight # _____ Arrival Date: _____ Arrival City: _____
 I will need an arrival transfer from airport to hotel. I will need a departure transfer from hotel to airport.
Depart Date: _____ Depart City: _____ Depart airline/flight # _____

HOTEL: Double Occupancy Single Occupancy
 I wish to extend my stay in Prague until _____ (date).
 I will need extra night(s) stay in Warsaw (prior to tour) please provide dates _____
 1 Bed 2 Beds

Special Hotel Request: _____

DEPOSIT INFORMATION

Deposit for _____ person(s). Amount enclosed: \$ _____ (\$1000.00 per person)
 Deposit by check. (Make checks payable to: JHST/Travel-On)
 Deposit by credit card. Fax this application with your credit card information to 240-387-4001, Attn: JDS Parents 2009
Credit card type: _____ Card number: _____
Expires: _____ Name on card: _____

I hereby authorize the travel agency to charge the above credit card for the tour payment. I agree to the terms and conditions set forth in the tour brochure.

Signature: _____ Date: _____
Print Name: _____

*** Due to the small group size, registrations will be accepted on a first come first served basis. Upon receipt of the deposit payment, we will send you a written confirmation along with a final payment invoice.**

Tour Questions: Claire Simmons (240) 387-4161 or csimmons@tvlon.com
Airline Related Questions or Changes: (240) 387-4033 or (877) 657-4772 or email at intl@tvlon.com

**Fax this form to (240) 387-4001 / (888) 613-4015 or mail it to:
JHST/Travel-On, 9000 Virginia Manor Rd, Suite 201, Beltsville, MD 20705, Attn: JHST JDS PARENTS-Poland 2009**