



MORE B.A.R.K LESS BITIN' TOUR 2012
Application Form

Please send this form to:
JTBA USA Washington DC
1629 K ST, NW
SUITE 703
Washington DC 20006
dc@jtbusa.com :
PH: 202-833-3531

Applicant Information

**Exactly as it appears on your passport*

First Name _____ Middle Name _____ Last Name _____

Date of Birth _____ Nationality _____ Sex Female Male

Address _____ City _____

State _____ Zip _____

Daytime Phone No. _____ Fax _____

Email _____

Travelers Information

Traveler 1 **Exactly as it appears on your passport*

First Name _____ Middle Name _____ Last Name _____

Date of Birth _____ Nationality _____ Sex Female Male

Traveler 2 **Exactly as it appears on your passport*

First Name _____ Middle Name _____ Last Name _____

Date of Birth _____ Nationality _____ Sex Female Male

Do you need a Air ticket? Yes _____ No _____

Travel Preferences

Departure City _____

Departure Date _____

Tour Package Plan

6days / 4nights LAND ONLY / AIR and LAND

Room type

Single Room _____ Twin Room _____

Special Request or Comment

Form of Payment

Credit Card

Visa Master Card Amex

To facilitate the immediate placement travel arrangements, the undersigned authorizes JTB USA, INC. to charge to my credit card as follows.

Credit Card Number _____ Expiration Date _____

Card Holder's Name _____ **Sec CODE :**

Billing Address _____

Signature _____ Date _____