



**JT Travel Service**  
We share your love of travel

**RESERVATION FORM**

7519 Quill Drive / Downey CA 90242 Phone: (562) 862-4324 Fax: (877) 828-6819

E mail: [tess@jttravelservice.com](mailto:tess@jttravelservice.com) Website: [www.jttravelservice.com](http://www.jttravelservice.com)

Tour Date: \_\_\_\_\_ Tour #: \_\_\_\_\_ Destination: \_\_\_\_\_

Land & Air \_\_\_\_\_ Land only \_\_\_\_\_ Departure City: (Gateway) \_\_\_\_\_

**Name:**

1. (Mr. Mrs. Ms) \_\_\_\_\_ DOB: \_\_\_\_\_ Roommate: \_\_\_\_\_

2. (Mr. Mrs. Ms) \_\_\_\_\_ DOB: \_\_\_\_\_ Roommate \_\_\_\_\_

3. (Mr. Mrs. Ms) \_\_\_\_\_ DOB: \_\_\_\_\_ Roommate \_\_\_\_\_

4. (Mr. Mrs. Ms) \_\_\_\_\_ DOB: \_\_\_\_\_ Roommate \_\_\_\_\_

**First name Middle Name/Initial Last Name (Print name exactly as it appears on your passport)**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (Home or Bus): \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Find me a roommate: Smoker: \_\_\_\_\_ non-smoker: \_\_\_\_\_ **we will give your phone number to other share requests)**

**FOR EACH TRAVELER: Please send a copy of the photo page of your passport together with this form.**

Passport must be valid for at least 6 months beyond the completion date of the tour.

**Payment options:** (Select only one)

( ) Full payment **with** Travel Insurance ( ) Full payment **without** Travel Insurance

( ) Deposit \$300.00. **I choose to purchase travel insurance.** Balance due 90 days prior to departure.

( ) Deposit \$300.00. **I decline to purchase travel insurance.** Balance due 90 days prior to departure.

**Payment by:** Check payable to: JT Travel Service. Credit card: VISA MC American Express Discover

**Credit Card Number:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **Code number:** \_\_\_\_\_

**Billing address:** \_\_\_\_\_

**Signature of card holder:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Signed reservation and /or payment (deposit or partial or full) for this tour constitute your acceptance of all Terms and Conditions provisions.

**Signature of person booking / travelling** \_\_\_\_\_ **Date:** \_\_\_\_\_

Guardian's signature \_\_\_\_\_ **Date** \_\_\_\_\_

(If traveler is under 18 years of age, legal guardian must also sign. Please sign as it appears in your passport)

**Submit reservation form, copy of passport photo page and payment by: Mail or Fax: (877) 828-6819**

Refer to our website for complete TERMS AND CONDITIONS

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