

Tour "German Christmas Markets"
Travel Date: December 07 - 16, 2012

Please Print:

Complete name: _____ (as it appears on passport!)

Home address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Phone: _____ Cell: _____ Gender: [] Female [] Male

Passport Information: Country of issue: _____ Number: _____
Expiration date: _____ Birth date: _____

Special meal/dietary requests: _____

Allergies/medical conditions: _____

Emergency Contact: Name: _____
Relationship to traveler: _____
Phone: _____ Cell: _____

Type of Room: [] Single [] Double [] Twin (two separate beds, availability is limited)

Roommate: _____

_____ (initial) I have read and I agree to the Terms & Conditions of this trip.

- [] I have been offered Travel Insurance for this trip - I decide not to purchase travel insurance through TGAC.
[] I have been offered Travel Insurance for this trip - I request to be provided with travel insurance information.
[] I book my flight myself. [] I need assistance for flight bookings.
[] I want to pay the with my creditcard - I request the creditcard payment authorization form (add fee of 5%).
[] Enclosed is my deposit check of \$800 per person. Please make the check payable to JO ANN WOLF.

Other indications: _____

Signature: _____ Location: _____ Date _____

To be assured of reservation, please complete and mail (or Email) this registration form to:
TGAC c/o Jo Ann Wolf, 605 Ross Street, Brenham, TX 77833, Phone: 281-630-6764, E-mail: info@tgac-us.com