

Yearn to Learn Tours LLC ♦ 13310 New Acadia Lane #301 ♦ Upper Marlboro, MD 20774

(301) 390-5835 ☎ (301) 249-8607

RESERVATION FORM **7 Day Cuba & Caribbean Cruise** (Please print)

Please complete & mail this form with your deposit of \$ 500 pp due upon signing. (\$100.00 non-refundable/non-transferable) deposit sent to the above address. Deposit & payments may be in the form of a check, money order, or bank draft payable to Yearn to Learn Tours. Final payment is due 10/24/2018. Credit cards will not be accepted as payments.

Contact Name: _____ DOB _____

Address: _____ Passport # _____ issue date: _____ Expiration date: _____

City: _____ State _____ Zip Code: _____

Please supply us with a copy of your passport/ Use contact name that is on your passport.

Phone # (HM) ____/____ (W) ____/____ (Cell) ____/____

Email address: _____ Special Needs *

Emergency contact's name _____ Phone _____

Additional travelers:

Name: _____ DOB _____

Email address: _____ Special Needs *

Add additional traveler information on a separate piece of paper.

Travel insurance is highly recommended. You may request a quote on the main page of our website from **Roam Right Travel insurance**. You can pay for it using your credit card on line. Initial here if you prefer to purchase from another Travel Insurance company. _____.

ACCOMMODATIONS: _DOUBLE _TRIPLE _QUAD _SINGLE

*Special Needs (dietary, mobility impaired, wheelchair assistance etc.)

SPECIAL OCCASION: _____

IDENTIFY EVENT AND PERSON

Person _____ Event _____

I have read and understand the terms and conditions for this trip.

Signature _____ Date: _____

Signature _____ Date: _____

FOR OFFICE USE ONLY

REC'D DATE _____ CK/MO/\$ _____ TRIP: _____

Agent: _____