



Travel Gingie's Way Inc
6065 Roswell Road N.E. # 2257
Atlanta, GA 30328

1-800-265-7769

ENDORSED BY



MEMBER



Travel Registration Form

Tour:

Departure:

Participant Name: _____

(As it appears or will appear on your passport)

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: _____ Day Phone: _____

Passport #: _____ Issued (city): _____ Citizen of: _____

Valid From: _____ Valid To: _____

Parents (Guardians) Name: _____

(For students)

Emergency Contact: _____ Relation To: _____

Contact Address and Telephone (if different from above): _____

Please list any special information regarding health or dietary requests: _____

I understand the "Terms and Conditions" for this tour, as well as the "Payment Schedule":

Signature: _____ Date: _____

(If student traveler, parent/guardian must sign)