

TOUR REGISTRATION FORM

Name as it appears on passport:				
Email address:				
Address (city, State, zip):				
Phone number:	(home)		(cell)	
DOB:				
Passport #:				
Issue date:				
Expiration date:				
We strongly recommend insuring your trip. Niche Touring any loss, illness, death, injury, missed flights, flight cancer may suffer (directly or indirectly) in connection with or ari insurance agencies which can assist you with policies the Booking Conditions : A non-refundable deposit of \$500 per person is required documents will be sent approximately 3 weeks before de Niche Touring should need to cancel for any reason, you	ellations, delays, co ising out of your par at best suit your co for reservations. Fi eparture. Cancellation	sts incurred from such de ticipation with this tour. No verage needs, or choose and payments are due 60 on fees will occur from 60	elays, lost luggage, or theft which Niche Touring can recommend your own agency. I days prior to departure. Final	you
Not included: Passport expenses, indicated meals not included, insura or changes in schedule or other cases beyond our control.		ies as noted on itinerary.	Any additional expenses due to	delay
I hereby affirm that I have read and fully unders	stand the above	information.		
Client's signature:				
Tour date: May 2024 September 202	24			
Deposit Amount Paid:	Date of deposit	: 		

Please make checks payable to: Niche Touring, LLC PO Box 213 Rt 113 & Cross Road Lederach, PA 19450