

**A BlackTie Affair Travel Group**  
**International Tour Registration Form**

*(All information collected will be held in strict confidence & will be shared only on an emergency basis)*

Tour Destination	Tour Departure Date

**Instructions**

Please clearly type, print, and complete the form below.

Make your initial deposit and mail all payments to:

**A BlackTie Affair Travel Group, LLC**

921 North Harbor Blvd. #113, La Habra, CA 90631

**Personal Information**

Guest Name <i>As it appears on your Passport</i>			
Passport Number			
Passport Expiration Date			
Date of Birth			
Telephone			
Street Address			
City	State	Zip	
Email Address			
Roommate Name	Amount Enclosed	\$	

*Please indicate by signing with your signature in the box below that you have read and understand the terms and conditions of this tour.*

Tour Guest's Signature	Print Name		
Signature of Parent/Legal Guardian (if tour guest is a minor)	Print Name of Parent/Legal Guardian	Date	

**Emergency Information:**

**In case of emergency, who should we notify during the tour?**

Name	Telephone No.
Relationship to Tour Guest	Name of Healthcare Provider

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**FOR A BLACKTIE AFFAIR TRAVEL GROUP USE ONLY**

Input Date: \_\_\_\_\_ Payment Type: \_\_\_\_\_ Amount: \_\_\_\_\_