

Reservation Application

PILGRIMAGE TO FATIMA, SPAIN & LOURDES WITH FR. DONALD CALLOWAY

JUNE 19 - 28, 2013

\$3,999 FROM NEW YORK

(depart from all US airports via: www.206tours.com/addon)

Contact: Cara, Rinda or Milanka tel: 800-206-TOUR (8687) or email: cara@206tours.com, rinda@206tours.com or milanka@206tours.com

****Items indicated in RED are mandatory****

Last Name/First Name, Middle Name (as it appears on passport) Date of Birth (please indicate country of passport - if not US) US Passport # Passport Exp.

1 _____ MM ___ DD ___ YY _____

please indicate gender: Male Female

2 _____ MM ___ DD ___ YY _____

please indicate gender: Male Female

3 _____ MM ___ DD ___ YY _____

please indicate gender: Male Female

4 _____ MM ___ DD ___ YY _____

please indicate gender: Male Female

Address _____ City _____ State _____ Zip _____

Home Tel # _____ Work/Cell Tel # _____ E-mail (s) _____

Departure City: New York Other _____ Nickname / Name tag _____ Roommate Request: _____

Interested in Post Tour Option? Paris, Nevers & Lisieux (TBA) Medjugorje (TBA) Rome & Assisi (TBA)

Single Supplement / Private Room: Fatima, Spain & Lourdes (\$398) Paris, Nevers & Lisieux (TBA) Medjugorje (TBA) Rome (TBA)

Business class upgrade: \$3,500 round trip \$1,750 one-way east bound \$1,750 one-way west bound

Travel Insurance will automatically be billed unless declined www.206tours.com/insurance. 206 Tours strongly recommends travel insurance.

You must initial here to **DECLINE** travel insurance _____ (if you are declining travel insurance, please send only \$400 for deposit per person)

I am interested in purchasing Cancel for any reason Insurance for an additional \$199 (Only valid if purchased in addition with regular travel insurance!)

For details please review back of flyer and or go to www.206tours.com/cancellationprotection

PAYMENT OPTIONS:

(www.206tours.com/payments)

Please enclose \$400 + \$189 (\$589 total) per person (deposit & insurance) ****Please select and fill out one of the 3 payment options below (boxes)**

Payment by **Check**: x _____ people = \$ _____

Payment by **Electronic Check**: (ACH): Routing # _____ Account # _____

First set of digits on the left side

Second set of digits after the routing number

Payment By **Credit Card**: (Circle One) American Express Visa Master Card Discover

Credit Card # _____ Exp Date _____ Sec. Code _____

****Please select one of the 3 options below (boxes)**

Please charge my deposit & insurance now and the balance due 60 days prior to departure

Please automatically charge my balance 60 days prior to departure

Please charge my total trip costs now

Please make checks payable to: **206 Tours**

Full payment is required **60 Days** prior to date of departure - **April 19, 2013**

Office Use Only

DC061913

Cara

Rinda

Milanka

Are you interested in a payment plan?

Please visit: www.206tours.com/payment-plan

**Signature _____

Date _____

Enrollment in/payment for this tour constitutes your acceptance of all terms and conditions as stated on page 4 and as per www.206tours.com/terms

Please Mail Reservation & Payments to: **206 Tours 333 Marcus Blvd. Hauppauge, NY 11788**