

Tour Registration Form

To ensure your reservation, complete, sign and mail this form with your check for \$500 per person, made payable to CCE to: Chinese Culture Exchange, P.O. Box 271333, West Hartford, CT 06127. **PLEASE ENCLOSE A COPY OF YOUR PASSPORT FOR EACH PERSON.**

Tour name: _____ Tour Date: _____

Last Name: _____ First Name _____ Preferred Name _____

Last Name: _____ First Name _____ Preferred Name _____

Last Name (child under 12): _____ First Name _____ Date of birth: _____

Last Name (child under 12): _____ First Name _____ Date of birth: _____

Address _____ City _____ State _____ Zip _____

Phone (H) _____ (Mom's W) _____ (Dad's W) _____

Phone (Mom's Cell) _____ (Dad's Cell) _____ Fax: _____

E-mail (Mom) _____ E-mail (Dad) _____

Please reserve space for adults _____; child _____ total of _____ or [] single occupancy at an additional cost
Room/Bed preference: [] one bed [] two beds [] smoking [] non-smoking

Family Medical Information:

In the event of an emergency we will contact your provider to secure approval for medical treatment.

Insurance Provider: _____ Policy/Group Number: _____ Telephone Number: _____

Physician(s) for Emergency Contact: _____

Prescriptions: Please attach a list of all prescription medications taken by all family members and their purpose. This list is for emergency use only and will be kept strictly confidential.

Allergies: Please attach a list of all allergies for all family members, including asthma, hay fever, medications, foods, insects, etc.

Special Requests: _____

Emergency contacts: (1) _____ Phone: _____

Emergency contacts: (2) _____ Phone: _____

Enclosed is my check payable to CCE in the amount of \$ _____ (\$500 per person x _____ total people)

I/We have read the brochure and I/we agree to all the terms and conditions. I/We agree to pay full payment by check 90 days prior to departure.

Signature: _____ Date: _____

Signature: _____ Date: _____

For further information, please contact:

Chinese Cultural Exchange

P.O. Box 271333, West Hartford, CT 06127, Tel: 860-523-9797 or 866-666-6520, E-mail: ccehtfd@aol.com, www.MingsChina.com