

Pilgrimage to France

Please register me for:

- BNP21 • Main Tour Aug. 16 - 26, 2021 • \$3,199
- Single Supplement (main tour) • \$695
- BNP21 • Pre tour August 13 - 17, 2021 • \$1,375
- Single Supplement (pretour) • \$250

Passenger Information (1st Traveler)

Please record information exactly as it appears on your passport. Passport information may be sent later if you have yet to obtain a passport. *Best practice is to include a photocopy of the picture page your passport with your application.*

Legal Name: _____

(Name for name badge): _____

Passport #: _____

Passport Exp. Date: _____

Passport Authority: _____

Date of Birth: _____

Place of Birth: _____

Gender: (required by airlines) Male Female

Dietary Needs: _____

Passenger Information (2nd Traveler)

Please record information exactly as it appears on your passport. Passport information may be sent later if you have yet to obtain a passport. *Best practice is to include a photocopy of the picture page your passport with your application.*

Legal Name: _____

(Name for name badge): _____

Passport #: _____

Passport Exp. Date: _____

Passport Authority: _____

Date of Birth: _____

Place of Birth: _____

Gender: (required by airlines) Male Female

Dietary Needs: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Work phone/cell: _____ E-mail: _____

Emergency Contact Name: _____ Phone: _____

Sleeping Preference (circle one): Double bed (1 bed) Twin Beds (2 beds)

Roommate name: _____ OR Single supplement: _____ Yes _____ No

Travel Insurance (please check one)

- I wish to purchase a travel protection plan and have included the premium with my deposit.
- I wish to decline the travel protection plan offered.

Deposit Payment Information (please check one)

- Enclosed is my \$ _____ deposit and insurance premium (if applicable). *Make checks payable to Blue Horizon.*
- Please charge \$ _____ deposit and insurance premium (if applicable) to my Discover/MasterCard/Visa

Credit Card Number: _____ Exp. Date: _____

Card ID Code:* _____ *last 3 digits in signature box on the back of the card

_____ Initial to acknowledge you understand that Federal law prohibits the carriage of certain hazardous materials in your luggage or on your person aboard aircraft and could result in a fine or imprisonment. Visit www.tsa.gov for more information.

Prices in this brochure were effective on 7.14.20. By signing below, I understand that price changes are possible at the time of final invoicing, due to exchange rates, an increase in carrier charges, fuel costs, taxes and tariffs, and the number of passengers traveling in the group. I agree to the terms and conditions of this tour.

Signature of 1st traveler: _____ Date: _____

Signature of 2nd traveler: _____ Date: _____



Return Application with payment to: Blue Horizon Travel & Yacht Charters
12570 US Hwy 150 • Orion, IL 61273
Main Office: 309-526-3499 • 800-939-4334