

# Iwo Jima – War in the Pacific Tour

## Registration Form

Personal Information (as it appears on your passport)

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Tel (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address \_\_\_\_\_

If you are traveling with a companion, please furnish the following information

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Tel (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Double (1 Bed)    Twin (2 Beds)    Single

If you want to be paired with a roommate, please check the box.

If you wish to book additional companions, please attach the necessary information.

Veteran Status    Iwo Jima Veteran    WWII Veteran   **WWII Veterans receive a 10% discount.**

**The 64th Anniversary of Iwo Jima Tour – March 9-20, 2009**

Tour price is \$7,200.00 per person based on double occupancy / \$8,100.00 per person based on single occupancy.

**Optional PostTour: Peleliu – March 20-25, 2009**

Please call for price and availability.

Stephen Ambrose Historical Tours accepts no liability for the purchase of non-refundable airline tickets. *Accommodations:* Extra nights are available before or after the tour. Please contact the office.

**To register for this tour, we require a deposit of \$500.00 per person. The deposit is non-refundable. 50% of tour cost is due 90 days prior to the tour with the full balance due 45 days prior to tour start.**

SAHT strongly recommends traveler's insurance. Please contact Travelex at (800) 228-9792, our account number is 18-6016.

I agree to SAHT's Terms and Conditions (please do not sign unless you have read the Terms and Conditions)

Signature \_\_\_\_\_ Date \_\_\_\_\_

If paying by check, please return your check with this form.

If paying by credit card, please check one of the boxes below. **Note: Additional charges of 3% will apply.**

Visa    Mastercard    American Express    Discover    Cardmember Name \_\_\_\_\_

Card # \_\_\_\_\_ 3-4 Digit Security Code (located in signature area on back): \_\_\_\_\_ Exp Date: \_\_\_\_\_

Billing Address (if different than above) \_\_\_\_\_

Notes: \_\_\_\_\_

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