



**ASIAN PACIFIC  
ADVENTURES**

# RESERVATION FORM

Asian Pacific Adventures  
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## PLEASE PRINT ALL INFORMATION

*(PLEASE MAIL A PHOTOCOPY OF THE FACE PAGE OF YOUR PASSPORT WITH THIS APPLICATION)*

### TRAVELER # 1

TOUR NAME & DATE:.....  
NAME AS IN PASSPORT:.....  
ADDRESS: .....  
CITY:.....ST:.....ZIP.....  
PHONE (H).....(W).....  
FAX: .....E-MAIL:.....  
BIRTHPLACE:.....DATE OF BIRTH:.....  
CITIZENSHIP:.....AGE:.....  
PASSPORT NO: .....VALID UNTIL:.....  
PLACE OF ISSUE:.....DATE OF ISSUE:.....  
OCCUPATION: .....  
HEIGHT.....WEIGHT.....

#### PLEASE CIRCLE ALL THAT APPLY

NON SMOKER      SMOKER      MALE      FEMALE  
VEGETARIAN      SINGLE      SHARE  
FATHER'S NAME (FOR IRAN ONLY):.....

### TRAVELER # 2

TOUR NAME & DATE:.....  
NAME AS IN PASSPORT:.....  
ADDRESS: .....  
CITY:.....STATE:.....ZIP.....  
PHONE (H).....(W).....  
FAX: .....E-MAIL:.....  
BIRTHPLACE:.....DATE OF BIRTH:.....  
CITIZENSHIP:.....AGE:.....  
PASSPORT NO: .....VALID UNTIL:.....  
PLACE OF ISSUE:.....DATE OF ISSUE:.....  
OCCUPATION: .....  
HEIGHT.....WEIGHT.....

#### PLEASE CIRCLE ALL THAT APPLY

NON SMOKER      SMOKER      MALE      FEMALE  
VEGETARIAN      SINGLE      SHARE  
FATHER'S NAME (FOR IRAN ONLY):.....

#### AIR TRAVEL:

MAKE AIR RESERVATIONS FROM.....  
AIRLINE PREFERENCE:.....  
FREQUENT FLIER NO.....  
FREQUENT FLIER NO.....

#### EMERGENCY CONTACT WHILE ABROAD

NAME.....  
RELATION.....  
ADDRESS.....  
PHONE (WORK).....  
(HOME).....

#### HOW DID YOU HEAR ABOUT US?

.....  
.....

I/We have read, understand, and agree to the general  
information, terms and conditions set forth in  
THE ASIAN PACIFIC ADVENTURES brochure

SIGNATURE.....DATE.....

SIGNATURE.....DATE.....

#### SEND FINAL DOCUMENTS TO:

NAME.....  
C/O.....  
ADDRESS.....  
.....SUITE.....  
PHONE.....

***(SOMEONE MUST BE PRESENT TO RECEIVE IT)***