



## Traveler Information

(Please return promptly)

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Name (as it appears on passport) \_\_\_\_\_ Preferred/nickname \_\_\_\_\_

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Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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E-mail \_\_\_\_\_

\_\_\_\_\_ Will you have this activated during travel? **Yes** **No**

Home/Cell Phone \_\_\_\_\_

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Contact at home in case of emergency (name and number) \_\_\_\_\_

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Passport Number \_\_\_\_\_ Country of Issue \_\_\_\_\_ Expiration Date \_\_\_\_\_

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Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Citizen (Country) \_\_\_\_\_

Please describe any health or dietary restrictions, special medications or needs:

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Any particular sight, experience or food you would like to have on this trip? (optional)

- 
- I lean toward: **red wine** **white wine** **beer**
  - Rooming with \_\_\_\_\_ or private room \_\_\_\_\_