

TOUR APPLICATION FORM!

(One Form per Person)



Tour Name (destination and date) _____

First Name _____

Last Name _____

Birth Day/ Month/ Year ____/____/____

Address _____

Phone _____

Email _____

List any allergies including food allergies _____

I have read and understood the terms and conditions displayed
on: www.tourswithmichael.com

Signature _____ Date _____

Method of Payment: (check one) Cheque____Money Order____Cash____

Credit Cards will incur 3% fees by the Airlines.

Please make all Cheques payable to: Michael Alyas.

Email application with a copy of your valid passport to:
michaelalyas@gmail.com

WWW.TOURSWITHMICHAEL.COM

Phones inquiries: **USA** +1 503-888-6117 or 1 503-919-4501

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