



**Cultural Tour Consultants**  
 a Subsidiary of Carlson Wagonlit Travel/Travel Professionals, Inc.  
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**Langley High School Wind Symphony and  
 Symphony Band Concert Tour**

**PLEASE PRINT CLEARLY**

**March 31-April 8, 2009**

*TRAVELER INFORMATION: Name must be exactly as it is or will appear on your passport*

Full Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Gender: M F

Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Frequent Flyer #: \_\_\_\_\_ Airline: \_\_\_\_\_

Roommate: \_\_\_\_\_ # of beds 1 2

Check if applicable     Land Only     Deviation     Single Room     Vegetarian     Kosher     Diabetic

If passport information is not available, please submit this form and provide missing information at a later date.

Passports must be valid for six (6) months after your return date.

I have been advised to consider the purchase of travel insurance

*Please note: some coverages may only apply if insurance is purchased within 2 weeks of your initial deposit*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature of parent or guardian for participants under 18 years of age