



GROUP REQUEST FOR 15 OR MORE PASSENGERS

The following information will be needed to price a group tour.

Submit the completed information and we will contact you as soon as possible.

Today's Dates: _____

Group Leader Name: _____ Position: _____

Church or Organization (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alt. Phone: _____

e-mail: _____

Best time to contact: _____

Country Destination(s): _____

Travel dates/time of year: _____

Number of Touring Days: _____ Free Days: _____

Hotel Class Preference 5-star/deluxe: _____ 4-star/first class: _____ 3-star/toursit class: _____

Estimated Number of Tour Members: _____

Departure City: _____

Number of Complimentary Tours: (i.e. 1 free for 7, 1 free for 10, etc)

Tour Budget (cost of tour)

Comments or Questions: