

Healy Tours General Booking and Registration Form

Please use this form to provide us the information we need to finalize your trip details. All information is confidential, and will only be used to complete reservations and bookings on your behalf. This form takes about 10 minutes to fill out, and does request your passport information. If you do not have passport information at this time, you may skip those questions, but we may ask you for this information at a later date.

At any time, you may call or text questions to: 484.241.0862 Email: <u>nichole@healytours.com</u> (mailto:nichole@healytours.com)

Please enter the information for each passenger traveling under PASSENGER #1, and then PASSENGER #2 below. Please use another form if you have more than two people traveling.

* Required	
1. Please indicate the trip you are registering for below: *	
New Year's Ireland 2021	
June Healy Group tour 2022	
Other/Private Trip not listed	
2. Today's Date *	

Format: M/d/yyyy

	including any Mr./Mrs./Ms. or Jr./Sr./etc.)	
4.	Passenger #1 Date of Birth	
		:::
	Format: M/d/yyyy	
	Name of Passenger #2 (please ensure this matches your passport name exactly, including any Mr./Mrs./Ms. or Jr./Sr./etc.)	
6.	Passenger #2 Date of Birth	
		:::
	Format: M/d/yyyy	
7.	Passenger #1 Home Address (please include street, city, state, zip)	
8.	Passenger #2 Home Address (If different from Passenger #1)	

9.	. Primary Phone Number for this Booking	
10	. Passenger #1 Email Address	
11.	. Passenger #2 Email Address	
12.	. Passenger #1 Passport Number	
13.	. Passenger #1 Passport Issuing Country	
14.	. Passenger #1 Passport Expiration Date	
		
	Format: M/d/yyyy	

7/16/2021

:::

20. Room Configuration/Bed Request
One Bed (may include a King, Queen, or Double) European bed sizes vary
Two Beds (usually twin or doubles by USA standards)
Three Beds (one double bed and one twin) usually called a 'family room'
21. What nicknames or names would you like us to address you with/use for your nametag? For example William and Nichole would be Billy and Nichole
22. Emergency Contact Information in the USA
23. Please let us know of any food or dietary restrictions that you follow:
24. Please let us know of any medical issues you have (this is confidential and used only to assist us in keeping you healthy and safe)
25. Are there any other personal needs or considerations you would like us to know about?

26. Please send me a quote for Travel Insurance to protect my trip.
Yes, please send a no obligation quote.
No, I have secured insurance protection elsewhere, or decline coverage.
27. I acknowledge that I have received and reviewed the Terms and Conditions related to this travel booking, and if booking travel for other individuals, I am responsible for the acknowledgment on their behalf. (If you have not reviewed, please return to the booking page, and review the Terms and Conditions). Your initials are required below to complete this booking, and act as your signature. *

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