CT/20/5107

7-9-20

## 11 DAYS TREASURES OF ITALY WITH THE PASSION PLAY OF OBERAMMERGAU

## **RESERVATION FORM**

Please read the all-inclusive tour features and conditions. Then complete this handy form. Book early!

MAKE CHECK PAYABLE TO:	Accommodation Desired:
NAWAS INTERNATIONAL TRAVEL	double room sharing with
MAIL TO: Rev. James Mohr WESTMINSTER COLLEGE 319 South Market Street	■ single room (\$850 extra per person)
Box 172 New Wilmington, PA 16172-0002	Enclosed is my check for \$as deposit
Tel: (724) 946-7116 or	(\$200 deposit per person) forperson (s)
(724) 813-5894	
Email: mohrjr@westminster.edu	
Passenger #1:	Passenger #2:
Clearly print your full name (last/first/middle) as it appears on your passport	Clearly print your full name (last/first/middle) as it appears on your passport
Name: Last	Name: Last
First	First
Middle	Middle
Gender: Please check ☐ Male ☐ Female	Gender: Please check ☐ Male ☐ Female
AddressStateZip	Address
Fmail	CityStateZip
Home Phone ()	Home Phone ()
Cell Phone ()	Cell Phone ()
Passport #	Passport #
Date of Issue	Date of Issue
Date of Birth DAY YEAR	Date of Birth DAY YEAR
Place of Country of	Place of Country of
BirthCitizenship	BirthCitizenship
I understand that the air-inclusive tour I am purchasing is subject purchase. Post-purchase price increases may be applied due to at I may be charged additional sums by Nawas International Travel S surcharges, fluctuations in foreign exchange markets or any commonditions.	ms and conditions as outlined in the General Conditions of this brochure. to supplemental price increases that may be imposed after the date of dditional costs imposed by a supplier or government. I acknowledge that Service, Inc. to off set increased fees, taxes, airline imposed international abination thereof along with any other items as outlined on the General rize Nawas International Travel Service, Inc. to bill me for such additional
Signature Passenger #1	Date
Signature Passenger #2	Date