



Phone: (800) 874 – 1996 Fax: (310) 546 – 8433

[www.mindbodytravel.com](http://www.mindbodytravel.com)

## Reservation / Information and Acceptance

We would like to ask you to fill in the following information and return via mail.

**Tour Name** \_\_\_\_\_ **Departure Date** \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_ / \_\_ / \_\_ Citizenship \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_ / \_\_ / \_\_ Citizenship \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_ / \_\_ / \_\_ Citizenship \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_ / \_\_ / \_\_ Citizenship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Telephone \_\_\_\_\_ Evening Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Requesting Single \_\_\_\_\_ Double \_\_\_\_\_ Triple \_\_\_\_\_ Roommate (Y/N)

Request Air (Y/N) From \_\_\_\_\_

\$500 per person deposit due at time of booking

**PAYMENT BY CREDIT CARD**  
AMEX

Circle One VISA, MASTERCARD, DISCOVER,

Cardholder's Name as it appears on the Card \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_ / \_\_ / \_\_

3 digit code on the back side of the card \_\_\_ (Amex cards – 4 digit on front) \_\_\_\_\_

Authorized Amount \_\_\_\_\_

**Required Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**I have read and understand the Terms and Conditions. Cardholder acknowledges receipt of goods and Services in the amount shown hereon and agrees to perform the obligations set forth to the Cardholder's agreement with the Issuer.**

**MAIL CHECK TO:** Mindbodytravel, Inc., 1334 Parkview Ave, Suite 210, Manhattan Beach, CA 90266