

# TOUR APPLICATION FORM

NAME OF TOUR: \_\_\_\_\_  AIR & LAND  LAND ONLY  
DEPARTING DATE: \_\_\_\_\_ FROM \_\_\_\_\_ (city) TO \_\_\_\_\_ (city)  
RETURNING DATE: \_\_\_\_\_ FROM \_\_\_\_\_ (city) TO \_\_\_\_\_ (city)

**Please type or print your first and last name exactly as it appears/will appear in your passport.**  
**If passport number is not available upon registration, please provide as soon as available; no later than final payment.**

NAME #1: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Mr/Mrs/Ms) (Last Name as it appears in passport) (First Name as it appears in passport) (mo / day / year)  
Nationality: \_\_\_\_\_ Passport #: \_\_\_\_\_ How do you want your badge to read? \_\_\_\_\_  
(Provide when available; no later than final payment)

NAME #2: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Mr/Mrs/Ms) (Last Name as it appears in passport) (First Name as it appears in passport) (mo / day / year)  
Nationality: \_\_\_\_\_ Passport #: \_\_\_\_\_ How do you want your badge to read? \_\_\_\_\_  
(Provide when available; no later than final payment)

ADDRESS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(No. & Street) (City) (State) (Zip Code)

PHONE: (\_\_\_\_\_) \_\_\_\_\_ /home (\_\_\_\_\_) \_\_\_\_\_ /work E-mail: \_\_\_\_\_

TYPE OF ROOM:  SINGLE  DOUBLE (with 1 double bed)  DOUBLE (with 2 twin beds)  TRIPLE  SMOKING  NON-SMOKING

NAME/S OF ROOMMATE/S: \_\_\_\_\_

IF YOU ARE TRAVELING WITH ANOTHER PARTY, PLEASE INDICATE NAME/S: \_\_\_\_\_

**SINGLES:** If you do not wish to have a roommate, please check this box . Should you wish to room with another single person requesting a roommate, please check this box  and answer the following questions: Do you smoke?  Yes  No. Do you mind if roommate smokes?  Yes  No. May we give your phone number to a prospective roommate?  Yes  No. Please note that you will be charged a single supplement fee. Should a roommate be found, you will receive a refund.

**SEATING:** Although seating cannot be guaranteed, we would be happy to make a request for you:  Aisle  Middle  Window  Adjacent

**DIET:** The following SPECIAL DIET is requested for: (Name/s of passenger/s) \_\_\_\_\_  
 Sugar-free  salt-free  vegetarian  kosher  low-cholesterol other \_\_\_\_\_  Flight Only  Flight & Land Arrangements

I/we have read, understand and agree to the terms and conditions, including the "responsibility" provisions, stated in Brekke's Scandinavia 2007 escorted tour brochure. I/we understand that a **passport with a validity of at least six (6) months beyond the conclusion of my/our trip** is required for international travel. Enclosed is my/our deposit (\$300 per person)/full payment of \$ \_\_\_\_\_ or please charge \$ \_\_\_\_\_ to my/our  VISA  MASTERCARD

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_ Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

In case of an emergency, notify: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Address: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(No. & Street) (City) (State) (Zip Code)

Please advise if you have any special medical problems of which the tour director should be aware: \_\_\_\_\_

Please comment on any aspect of Scandinavia which may be of particular interest to you: \_\_\_\_\_

Do you have any ancestral roots in Scandinavia? If so, where? \_\_\_\_\_

How did you find out about this tour? \_\_\_\_\_

Did you select this tour based on: (If more than one answer applies, please indicate ranking by 1 being your first consideration.)  
\_\_\_\_\_ Visits to specific city/region \_\_\_\_\_ Overall general itinerary \_\_\_\_\_ Date of tour

With your tour documents, you will receive a list of all tour participants indicating their hometown. If you DO NOT wish your name to appear on this list, please check here .

Miscellaneous Comments: \_\_\_\_\_

Complete & return to:

**BREKKE TOURS/SCANDINAVIA • 802 N 43rd St. • Grand Forks, ND 58203**  
**Local: (701)772-8999 Toll-free: (800) 437-5302 Fax: (701) 780-9352**  
**Email: [tours@brekкетours.com](mailto:tours@brekкетours.com) Website: [www.brekкетours.com](http://www.brekкетours.com)**