REGISTRATION FORM

Please use a separate form for each person traveling.

Full name (by cap		a copy of your passport name pa	ge Please check all that apply:
First	Middle	Last	I will attend Oct 12 - 20, 2024 trip
Date of birth: m	/d/y	Passport Number:	I wish to upgrade my airfare to Int'l Business Class - USD\$8,000
			room for an additional USD\$800
City:	S	t: Zip:	I will pay for deposit by my credit card at \$500 (Member price \$400)
		_ Fax:	I enclosed my deposit \$500
Who you are sharing	a room with:		
Type of Room (please	e check one): □ 1 lesservation, IF YOU DO	King Bed □ 2 Queen Bed NOT PAY THE SINGLE SUPPLEM	s □ Triple Beds IENT you will be paired with another passenger of same
n your total tour fare. Check Enclosed (The balance is due of Payable to Chamber	on or before Friday June 28, 202	
□ Credit Card #		Exp. DateCVV Cod	deName on Card
A valid passport is	on passengers' res	ponsibility. Please attached the j	peg copy of your passport information page.
/nez Ave., # 205, Mo	nterey Park, CA 917	54 ♦ Toll Free (844) 262-1100, E	r. Tour Operator: Citslinc International, Inc. 108 N. Email: <u>citslinc@aol.com</u> Website: <u>www.citslinc.org</u> 6-0886 <u>katie@citslinc.org</u> <u>citslinc88@gmail.com</u>
This will be deducte for any reason after	d from your total tou June 28, 2024 you v	r fare, the balance of which will b	person is required and due at the time you register. be due by June 28, 2024. If you need to cancel the trip op of the USD\$500 (Member \$400) registration fee, nber \$400).
	g a passport is your do not need for any		e valid 6 months past travel date. The U.S. and
your questions and	familiarize you with o		nd location will be announced. We will answer all of slinc International Inc. has 38 years of experience in to your satisfaction.
		The state of the s	All lands and a consense to waller will be an inches
Maria .			