

Sukyo Mahikari
North American Region Traveler's Information
for **Tour**

The North American Regional Headquarters of Sukyo Mahikari would like to have the following information: *(Please Print)*

Center Name:			Date:		Language:			Member #:			
Last Name:				First Name:				Age:		Gender:	
Address:						Phone / Cell:					
City:			State:		Zip:		Center Role:				
Person to contact in case of an emergency											
Name:						Relationship:					
Address:						Phone:					
City:						State:		Zip:			
Enter Tour you would like to participate in:											
Enter Tour:				Additional request:							
Option Tours:											
Passport Number:				Expire:		Country Issued:					
Roommate in Nagoya / Tokyo: Type of Room: Single <input type="checkbox"/> Double <input type="checkbox"/>											
Roommates in Takayama: 1. 2. 3. Type of Room: Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Quad <input type="checkbox"/>											
Roommate in Tokyo / Nagoya: Type of Room: Single <input type="checkbox"/> Double <input type="checkbox"/>											
Traveler's Insurance Information (Included in the tour)											
1. Do you have any ongoing medical conditions? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:											
2. Do you have any physical impediments? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:											
3. Do you have any problems walking? Yes <input type="checkbox"/> No <input type="checkbox"/>											
Departing Flight Information											
Departing from					Arriving at						
Date	Flt. #	Airline	Time	Airport	Date	Flt. #	Airline	Time	Airport		
Returning Flight Information											
Departing from					Arriving at						
Date	Flt. #	Airline	Time	Airport	Date	Flt. #	Airline	Time	Airport		
Signature:						Date:					
Staff's Approval:						Date:					

October 2013

1. Must have Staff approval before sending application
2. If requesting single rooms, cost per night maybe as high as \$50.00 per night
3. Please enter all airline connection. Also enter cell number if in case RHQ needs to contact you.
4. Please enter age for insurance purpose and tour you wish to be on.