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FAX.052-253-7189
《Application Form》

Tour Date			Tour Course Name	
Applicant	Katakana			
	Name		Gender	Male / Female
	Date of Birth :(Y/M/D)			
	Occupation :		Work / School Tel :	
	Address 〒		TEL : FAX :	
E-mail			Mobile :	
Emergency Contact		Name ;		TEL
Payment	Credit Card (Visa / Master) / Combi / Bank (Net Banking / ATM pay easy only)			

Language	Mother Tongue :		Other Language ⇒		
Food can not eat Reason	Beef	Pork	Chicken	Raw Fish	Other⇒
	Allergies		Religion	Other Reason ⇒	

Travel Companion	Katakana		Gender	
	Name :		Male / Female	
	Date of Birth :(Y/M/D)		TEL	

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	Name :		Male / Female	
	Date of Birth :(Y/M/D)		TEL	

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	Name :		Male / Female	
	Date of Birth :(Y/M/D)		TEL	

【Remarks】	* Please write			

<Purpose of using personal information> We will use the personal information submitted when applying for travel to contact customers, and also provide transportation, accommodation facilities, etc. on the travel for which the customer applies. We will use the service within the necessary range for arranging and receiving the service. We may also use your personal information to develop better travel products and to provide you with information about your travel products. *For details, please refer to our website.



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