

First Hand Travel
FALL 2002 Registration Form

Please fill out **all** of the following information for apartment registration in Italy.

Last name _____ First name _____

Date of Birth: month _____ date _____ year _____

Place of Birth: City _____ State _____ Country _____

Home Address: _____
(street)

(city, state, zip code)

Telephone: (_____) _____ Email: _____

Person to notify in case of emergency: _____

Relationship: _____ Telephone: (_____) _____

Country of Citizenship: _____

Passport number: _____ City and Country of Issue: _____

Date of issue: month _____ date _____ year _____

Valid until: month _____ date _____ year _____

Please fill out if applicable

Visa Account Number: _____ Issued by: _____

Valid until: month _____ date _____ year _____

Sex: Male Female Smoker _____ Non-Smoker _____

Roommate request _____

Other special considerations? _____

Important: Do not return this form until you have the required passport information. We use this form to register all program participants with the Italian authorities. Information must be complete and accurate.

Nonrefundable Deposit of **\$195.00** USD is due: **May 29, 2002**

\$900.00 USD – First Installment is due: **July 30, 2002**

\$900.00 USD – Final Payment is due: **September 5, 2002**

Send registration form & checks payable to:

First Hand Travel Attention: Alison Canfield

PO Box 1518, Jamaica Plain, MA 02130

Please indicate amount enclosed: _____