



1302 Esplanade #303N Redondo Beach CA 90277
 Phone: 310-316-1930 Fax: 310-316-3141 E-mail: info@cocointernational.net

Tour Application Form

Tour name : Beautiful Japan 7days Beautiful Japan 8days West Japan 7days Hokkaido 6days
 (Please Circle)

Traveler 1

Last Name
 (print Exactly as it appears on passport)

First Name
 (print Exactly as it appears on passport)

Date of Birth (DD/MM/YYYY) _____
 Mailing Address _____

City, State and Zip _____

Phone(home) Phone(work) _____

Fax Email _____

Passport No Valid Until _____

Place of Issue _____

Payment Method Credit Card(Authorization Form Required) Check or Money order
 (Please Circle)

Emergency Contact(Name) _____

Tour Date & Type Request
 (Please Circle)

Departure Airport Request Los Angeles Honolulu San Francisco Other City()

Travel Dates Request Departure Date: _____ Return Date: _____

Hotel Room Request Twin Single Triple Non-Smoking Smoking
 (Please Circle)

Travel Insurance Yes No

Other Requests _____

Traveler 2

Last Name
 (print Exactly as it appears on passport)

First Name
 (print Exactly as it appears on passport)

Date of Birth (DD/MM/YYYY) _____
 Mailing Address _____

City, State and Zip _____

Phone(home) Phone(work) _____

Fax Email _____

Passport No Valid Until _____

Place of Issue _____

Package Tour Land Only

Phone _____

I/We have read, understand, and agree to Terms & Conditions.

Signature: _____ Date: _____

Signature: _____ Date: _____

Local participant also understood the rules and the stipulation, I will sign the representation.

Signature: _____ Date: _____