CELTIC JOURNEYS 2025 Escorted Tour Registration Form

Mail to: Celtic Journeys 413 Wacouta Street, Suite 250 St. Paul, MN 55101 - Tel 651-291-8003 OR FAX: 651-222-1322 E-mail: Jean@celtic-journeys.com - www.celtic-journeys.com

Janine Bajus & Jillian Moreno - Yorkshire - Cumbria & The Lake District Dates: May 13th - May 25th, 2025

			DOB:
(Mr./Mrs./Ms) Full Name - as it appears/or will app	ear in your Passport		
			DOB:
(Spouse/Companion) Full Name of person sharing	with - as it appears/or v	vill appear in Passport	
Home Address (as per credit card billing)			City
State Zip Preferred Telephone	() Cell Telephone	E-Mail	
Airline Reservations:	•		
I would like help with my airline reservations			vn airline reservations □
Departing from ———		jean@celtic-jo	copy of your itinerary once booked.
Departing from ————		jean@cente-jo	ui neys.com
A process fee of \$50.00 will be charged for	booking airline ticl	kets	
LAND DEPOSIT AMOUNT IS: \$1000 PE	R PERSON		
Custom Trips: \$1000 of the initial land deposit pa		ole once paid Cancellati	on made after final payment has been
made (8 weeks prior to departure) and prior to dat	e of travel is subject to	refunds obtained at trai	nsportation and hotels discretion in re-
selling accommodation. Airfares are generally n check on any individual cancellation policies relat			(check your specific ticket). Please
		•	
Travel Insurance is	highly recommen	ded - please ask for	a quote
Please reserve: All rooms will be requested as	s non-smoking unless	otherwise advised	
Twin (2) Bed Room □ Single Bed Room □ I	Double Bed Room	l	
Method of Payment: Visa ☐ MasterCard	☐ Amex ☐ Checl	c or Money Order 🗆	
Credit Card #:	Exp:	Cardholder's Name:	
3 Digit Sec: (on back)			
**For the land portion a discount is offered base	ed on CHECK PAYM	IENTS to offer you the	best price possible. This discount wil
not apply if paid by credit card - (Deposit and Fig.	nal payment must be p	paid by check to receive	this discount) However credit card car
be used for air and travel insurance. (Discount d I hereby authorize Celtic Journeys to charge the			
form constitutes full acceptance of all terms an			
Card may also be used to issue my airline ticke requested by me. I will be notified of any costs	ts direct with whiche or charges prior to ca	ver airline has been agi ard being charged.	reed upon or/and travel insurance if
Cardholder's Signature			
I/we would like a quote for Travel Insurance for			
Name:	(Gender:	
Name:			
I/We decline Travel Insurance. Signed:			
Emergency contact:			
		101	
ALLEDCIES OF EOOD CONCEDNS.			