



34591

# Prelude Registration Form

Please use blue or black ink, print in CAPITAL LETTERS and fill in circles completely. Do not staple anything to this form.

Group #

Please list number of companions you will be traveling with: \_\_\_\_\_

## Personal Information:

Encore mails your airline tickets via express mail. List an address where someone can sign for a package during the day. We cannot mail tickets to a P.O. Box.

Mr.  Ms.  Mrs.  Dr.  Br.  Sr. Gender:  M  F

Last Name (AS IT APPEARS ON PASSPORT)

First Name

Middle Name

Address No P.O. Box

City

State

Zip Code

Home Telephone

Birthdate MM/DD/YYYY

Email

## Passport Info

Passport Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Country of Issue \_\_\_\_\_ Issue Date \_\_\_\_\_

## Transportation

(See [www.encoretours.com/directors/prelude.cfm](http://www.encoretours.com/directors/prelude.cfm) for list of US gateways.)

U.S. departure city \_\_\_\_\_ Estimated travel time to departure airport \_\_\_\_\_ hrs.  
(Encore cannot guarantee evening departures.)

I am booking a connecting flight to my Encore departure city.  Please quote me a price from a departure city not listed (specify city): \_\_\_\_\_

## Rooming Choice

Please book me in a:

single room at \$85 extra per night  double room, sharing with \_\_\_\_\_  2 single beds  1 double bed

## Optional Services

Please book me for \_\_\_\_\_ extra day(s) at the beginning and/or \_\_\_\_\_ extra day(s) at the end of my trip. **Encore will bill me \$50 per person for extending my ticket.**

I will arrange my own accommodations for the extra days.

Encore will provide accommodations for me based on:  Twin/double room at an additional \$150 per person per night

Single room at an additional \$250 per person per night

## Protection Plan:

Encore requires that you accept/decline protection

Yes: Sign me up for the Ultimate-Plus Protection Plan (Add \$50/day) Yes:

Sign me up for the Ultimate Protection Plan (Add \$35/day)  No: I decline the additional coverage beyond the Basic Protection Plan.

### RETURN TO:

Encore Prelude  
330 Congress Street  
Suite 5  
Boston, MA 02210

I have read and agree to the Terms and Conditions, including the terms of eligibility, companion trip fees and cancellation penalties. I understand that if I cancel my trip less than one month prior to departure, I will be subject to the penalties listed in the Terms and Conditions.

Signature \_\_\_\_\_

Date \_\_\_\_\_