

Kyushu Shopping 2025 December 2 - 10, 2025

Application Form

Please provide passengers' names exactly as on valid passports

PASSENGER (1)

LAST NAME								
FIRST NAME								
MIDDLE NAME								
DATE OF BIRTH (MM/DD/YYYY)		C	Gender		Citizenshi	р		
PASSPORT NO.		DATE OF EXPIRY (MM/DD/YYYY)						
E-MAIL ADDRESS								
PHONE NUMBER								
HOME ADDRESS								
AIRLINE MILEAGE INFORMATION	AIRLINE			ACC NO				
GLOBAL ENTRY or TSA NUMBER								
EMERGENCY CONTACT NAME & RELATIONSHIP								
EMERGENCY CONTACT PHONE NUMBER								
EMERGENCY CONTACT E-MAIL								
DO YOU HAVE ANY FOOD ALLERGIES OR STRONG FOOD PREFERENCES?							NO	
IF YES, PLEASE E	IF YES, PLEASE EXPLAIN							
TOUR PKG TYPE:	WITH GRP	AIRFARE		LAND	PKG ONL	Y		

SURVEY

How did you find out about our tour? Please check all that apply.

Star Advertiser	Newsletter	Instagram	Website
Store Flyer	Friend/Fa Recommen	Other:	



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PASSENGER 2								
LAST NAME								
FIRST NAME								
MIDDLE NAME								
DATE OF BIRTH (MM/DD/YYYY)		(Gender		Citizenshi	ip		
PASSPORT NO.				OF EXPI /DD/YYYY)				
E-MAIL ADDRESS			-		_			
PHONE NUMBER								
HOME ADDRESS								
AIRLINE MILEAGE INFORMATION	AIRLINE	AIRLINE ACC NO.						
GLOBAL ENTRY or TSA NUMBER								
EMERGENCY CONTACT NAME & RELATIONSHIP								
EMERGENCY CONTACT PHONE NUMBER								
EMERGENCY CONTACT E-MAIL								
DO YOU HAVE ANY I STRONG FOOD PRE		GIES OR		□ Y	Έ S [NO	
IF YES, PLEASE EXPLAIN								
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PASSENGER ③



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EMERGENCY CONTACT NAME & RELATIONSHIP								
EMERGENCY CONTACT PHONE NUMBER								
EMERGENCY CONTACT E-MAIL								
DO YOU HAVE ANY STRONG FOOD PRE		GIES OR		□ Y	ES		N	10
IF YES, PLEASE E	XPLAIN							
TOUR PKG TYPE:	WITH GRP	AIRFARE		LAND	PKG (ONLY		

PASSENGER (4)