

# REGISTRATION FORM

For further Information, Payment, Registration Please Contact;

Nihat Mercan

Operations Manager

Turkish Airlines Stellar Travel Inc. GSA of THY

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Mobile: 1+ (416) 301 2859 [nihat.mercan@thycanada.com](mailto:nihat.mercan@thycanada.com) [www.mystellar.com](http://www.mystellar.com)

Tour Program you want to participate in: \_\_\_\_\_

Name as it appears at the passport (First, Middle, Last)

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Mr. Mrs. Ms. Rev. Dr. If different than above

Street Address: \_\_\_\_\_

PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: Area Code: \_\_\_\_\_/\_\_\_\_\_

Work Phone: Area Code: \_\_\_\_\_/\_\_\_\_\_

Email Address: \_\_\_\_\_

Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Nationality of Passport: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Please select your room type: Single \_\_\_\_\_ Double \_\_\_\_\_

If Double, Name of your roommate (as in passport): \_\_\_\_\_

Please enclose your \$350 CAD deposit to Stellar Travel, for us to be able to confirm your booking. If paying by credit card please complete the following. Total payment is due 60 days prior to your Tour start date.

Credit Card: (Please circle one):

Visa MasterCard Amex Card Number: \_\_\_\_\_ Exp.Date: \_\_\_\_\_

**I have read and understood the terms and conditions and agree to each of them**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_: