

Serial No.	Waitlisted No.
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Date received:
Accepted Date:

ASIAN TOURS REGISTRATION

Member's Name:	Membership Number:
Contact Email:	Contact Phone/s:
Tour Name:	Tour Dates:
Requested Roommate Name:	Date of Application:

PAYMENT

Please complete all sections. Tour Price = Deposit + Balance Payment. If you pay by credit card, please authorize both deposit & balance payment as shown. Your credit card will be automatically charged on the due date.

	Tour Price	Deposit		Balance Payment	
		Amount	Payment Date	Amount	Payment Date
Member's Name:	HK\$	HK\$	Upon Acceptance	HK\$	
Guest or Spouse Name*:	HK\$	HK\$	Upon Acceptance	HK\$	
TOTAL:	HK\$	HK\$		HK\$	

PAYMENT METHOD: Check VISA Card Master Card

Payment made by Check:	Payment made by Credit Card:
Name to appear on Refund Check: Check No. _____ Check Payable to: 'AWA' Enquiries made to: 2527-2961 Fax Orders Send to: 2865-7737 Forms, Check, Mail Orders Send to: AWA, Room 1105 Arion Commercial Centre, 2 Queen's Road West, Sheung Wan, Hong Kong Email Orders Send to: info@awa.org.hk	Please charge my credit card for the above amounts and on the payment dates listed. I would like to make credit card payments via: <input type="radio"/> Mail Order <input type="radio"/> Email Order <input type="radio"/> Fax Order <input type="radio"/> Walk In Credit Card No. _____ Card Issuing Bank: _____ Card Expiry Date (MM/YY): _____ Cardholder's Name: _____ Cardholder's Signature: _____ Date: _____

Additional Registration Forms can be downloaded from <https://www.awa.org.hk>

QUESTIONS can be answered by contacting one of the tour coordinators. The AWA office staff will not have the information.

CASH: AWA will not accept cash for payment of Asian Tours. Checks/Credit Card payment made by Mail, Email and Fax orders will not be issued with a receipt. If you pay by credit card, please authorize both deposit & balance payment as shown above. Your credit card will be automatically charged on the due date. If you wish your guest or spouse to pay with a separate credit card, you should complete 2 registration forms and submit to the AWA office at the same time.

***Eligibility:** Each AWA member is allowed to sign up with a maximum of one guest or spouse and they should be listed in the "Guest Name" line of this form. Spouses and immediate family members living with an AWA member pay the member price. All participants **MUST** be 18 years or older to participate in Asian Tours, unless otherwise specified on the trip insert. Guests (non-members) need to add an additional HK\$1,000 to the tour price.

Participation: All trip applications will be processed on a first come, first served basis. On receipt of your registration, the trip coordinator will email you of your registration status: either you have been accepted to attend the tour, wait listed for the tour, or cannot attend because the tour has been closed to new applicants. No preferential treatment will be given to Asian Tours Committee members, Board members or office staff. However, trip coordinators will be allowed to hold a place for a guest.

Roommates: If you have a requested roommate, please indicate in this form. If you do not sign up with a guest or nominate a person as a roommate, the coordinator will assign you with one.

Cancellation: If you have been accepted on the tour and you cancel for any reason, there will be a non-refundable HK\$1,000 charge. If you cancel, there will be no refund of money for any unused portion of the package after payments to third parties are made by AWA.

Refund: A refund check will be issued and mailed to you unless you wish to donate part of the refund money to AWA charities.

Fit for Travel: Prior to registering, we recommend that you consult with your physician and call the Port Authority at 2961-8852 for travel advice.

Changes: Due to circumstances beyond our control, quoted priced and the itinerary may be subject to change without prior notice.

Important: Failure to comply with these instructions and late payment of the final balance may result in you losing your place on the trip.

OFFICE USE (Revision: May,2010) :

DEPOSIT:	BALANCE or FULL PAYMENT:	Cancellation Date:
Amount:	Amount:	Refund Date:
Date:	Date:	Amount:
<input type="radio"/> Website <input type="radio"/> MYOB	<input type="radio"/> Website <input type="radio"/> MYOB	<input type="radio"/> Check No. _____ <input type="radio"/> Credit Card