



Beverly Marshall-Luney
Travel Specialist
Florida Seller of Travel #ST38545
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Client Registration Form

Please complete registration form & return to:
bev@platinumtoursinternational.com

Name (as shown on U.S. Passport)

First Middle Last

Address

City State Zip Code

Telephone Home Office Mobile

Email address

Date of Birth Place of Birth

Passport Number Place of Issue

Issue Date Expiration Date

Emergency Contact Phone

Credit Card Authorization (Your personal information will not be duplicated and kept secure.)

☐ American Express

☐ Visa

☐ MasterCard

Credit Card # Expiration Date Security Code

Name as it appears on credit card

Card holder's billing address

City State Zip Code

Deposit: \$ Total Charge: \$