



PAX RIVER ITT
EUROPEAN VACATION INFORMATION FORM



Office Telephone Number: 301-342-3648
Office Fax Number: 301-757-7485
Office Email: mwrpaxitt@navy.mil

Quotes cannot be provided without complete information. Quotes can change on a daily basis according to availability.

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Circle one: Active duty Retiree DOD Contractor Email Address: _____

Date of Vacation: _____ Vacation Length: _____

Destinations: _____

Your must sees/Tours/Extras:

Insurance Needed: Yes No

Airline Needed: Yes No From: _____

Special Needs:

Handicapped Other _____

Please complete with names as they appear on passports:

Name of Guest 1: _____ DOB: _____

Name of Guest 2: _____ DOB: _____

Name of Guest 3: _____ DOB: _____

Name of Guest 4: _____ DOB: _____

Name of Guest 5: _____ DOB: _____

Name of Guest 6: _____ DOB: _____

Name of Guest 7: _____ DOB: _____

Please be aware that passports are required for all out of country travel. Deposits and final payment are made by charge card: Visa, AMEX, MasterCard or Discover. Deposits are required per person. Room availability and rates can change day-to-day or even hour-to-hour. Please make sure you have all required documents needed. Any questions for Immigration call 1-800-375-5283.

