

75th Anniversary Internment Bus Tour, July 10-14, 2017 Application Form

NUMBER OF PEOPLE _____ NUMBER OF BEDS PER ROOM _____

NAME Mr. Mrs. Ms. _____ **MAIDEN NAME** _____

ADDRESS: _____

PHONE NO: _____ **E.MAIL:** _____

NAME Mr. Mrs. Ms. _____ **MAIDEN NAME** _____

ADDRESS: _____

PHONE NO: _____ **E.MAIL:** _____

TOTAL COST \$ _____ Double or Twin room: member rate \$900, non-member \$950
Single room: member rate \$1200, non-member \$1250

NNMCC member number _____

*membership information: ask at the front desk or see website www.centre.nikkeiplace.org

Please submit application form and deposit of \$300 per person to the Nikkei National Museum by April 30, 2017. Balance due by May 31, 2017. We accept cheque, debit, VISA, Master Card and cash. You can also pay online through Paypal by sending payment to jcnm@nikkeiplace.org.

Refund policy: Refunds will be issued in full if the bus tour is cancelled by the Museum.

Cancellation policy: Refunds will be issued in full if cancellation notice is received by April 30, 2017. After May 1, 2017, refunds will only be issued if another person fills your vacancy.

For more information contact Nichola Ogiwara, Museum Programmer at the Nikkei National Museum ogiwara@nikkeiplace.org | 604.777.7000 ext.109.



Please complete the following information to help us meet your needs during the trip.

NAME: _____

Senior (over 65 years old)

Under 64 years old

Interned: yes no Camp(s) _____

May we contact you for information about your camp experience? YES NO N/A

EMERGENCY INFORMATION

Emergency contact person NOT on the bus tour:

NAME _____ Relationship _____

Cell phone# _____ Work phone# _____ Home phone# _____

MEDICAL CONDITIONS AND MEDICATIONS

FOOD ALLERGIES (please note many meals will be buffet style)

Special Skills/Training: (e.g., RN, MD, music, photography, videography)

ROSTER LISTING of bus tour attendees will be created and distributed only to attendees of the 2017 bus tour. The purpose of the roster is to facilitate communication; neither the Nikkei National Museum nor anyone receiving the roster will be given permission to sell or otherwise distribute the list to others. You can opt out of inclusion here: Please do not list ANY of my information (including my name).

Please check the information you would like to be included in the roster:

Name Address Phone Email

