

Japan 2026- Kimono: Textiles, Arts, Traditions

October 16 - 28, 2026

Please send completed registration form to

EYHO Tours Inc., 397 CRANBROOKE AVE., TORONTO ON M5M 1N4 Canada

Email: shila@eyhotours.com Tel: 1-801-EYHO (3946)

Name _____
(As it appears on your passport)
Address _____
Province/State _____
Postal/Zip Code _____
Phone (work) _____
Phone (home) _____
Email _____
Emergency Contact _____
Phone _____

Tour: Japan 2026 Kimono tour - based on 15 pax

Price per person in double occ. **USD 6500** ____

Single supplement **USD 1250** ____

** For each group size less than 15, surcharge of USD 150 applies. See p. 13 of itinerary

Optional pre tour: Amami Island 4N/5D: Min 6 pax.

Price per person double occ. **USD 3200** ____

Single supplement **USD 780** ____

Please enquire

Payment

Please send **USD 800 deposit** to EYHO Tours along with this registration form. Payment options [here](#).

Balance due June 14, 2026

Tour conducted by EYHO Tours Inc. Accredited by Travel Industry of Ontario (TICO) Reg. 50029991. Please review [Additional terms and conditions](#). These form part of your contract.

Cancellation

More than 120 days before departure: full refund less \$500 booking fee

119-90 Days: tour cost is 20% non-refundable

89-60 days: tour cost is 40% non-refundable

59 – 45 days: tour cost 60% non-refundable

44 – 29 days: tour cost is 90% non-refundable

Less than 30 days : 100% non-refundable

Refunds cannot be made for domestic flights. The Company reserves the right to retain an administration fee of USD 500.

Indicate here if you will **NOT** be purchasing travel insurance ____

Passport No. _____

Country of Citizenship _____

Date/Place of Issue _____

Date of Expiry _____

Day/Month/Year of Birth _____

Travel Insurance (can supply details later)

Travel Insurance Company: _____

Insurance No. _____

I assume all costs associated with medical expenses and repatriation on tour _____ (initial)

I am physically and emotionally fit for this tour. (see p 2-3 of FAQs for fitness requirement) _____ (initial)

International flight details (can supply later)

ARRIVAL City _____ Date _____

Airline _____ Flight _____ Time _____

DEPARTURE City _____ Date _____

Airline _____ Flight _____ Time _____

Any dietary restrictions or allergies?

Japan eating establishments take dietary concerns seriously. Please be specific i.e.. dietary restriction or intolerance or allergy? How severe?

Roommate Request _____

Signature _____

PRINT NAME _____

Date _____

Thank you!