

Japan 2026- Textiles Arts and Crafts

November 4 - 17, 2026
optional Amami Island Nov 17 - 21

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)

<p>Name _____ (As it appears on your passport)</p> <p>Address _____</p> <p>Province/State _____</p> <p>Postal/Zip Code _____</p> <p>Phone (work) _____</p> <p>Phone (home) _____</p> <p>Email _____</p> <p>Emergency Contact _____</p> <p>Phone _____</p>	<p>Passport No. _____</p> <p>Country of Citizenship _____</p> <p>Date/Place of Issue _____</p> <p>Date of Expiry _____</p> <p>Day/Month/Year of Birth _____</p> <p><u>Travel Insurance (can supply details later)</u> Travel Insurance Company: _____ Insurance No. _____</p> <p>I assume all costs associated with medical expenses and repatriation on tour _____ (initial)</p> <p>I am physically and emotionally fit for this tour. (see p 2-3 of FAQs for fitness requirement) _____ (initial)</p>
<p>Tour: Japan 2026 Textiles Arts and Crafts - based on 15 pax</p> <p>Price per person in double occ. USD 6900 _____</p> <p>Single supplement USD 1570 _____</p> <p>** For each group size less than 15, surcharge of USD 150 applies. See p. 13 of itinerary</p> <p>Optional: Amami Island Immersion: Min 6 pax.</p> <p>Price per person double occ. USD 3200 _____</p> <p>Single supplement USD 780 _____</p> <p>Itinerary attached.</p>	<p><u>International flight details (can supply later)</u></p> <p>ARRIVAL City _____ Date _____ Airline _____ Flight _____ Time _____</p> <p>DEPARTURE City _____ Date _____ Airline _____ Flight _____ Time _____</p>
<p>Payment</p> <p>Please send USD 800 deposit to EYHO Tours along with this registration form. Payment options here.</p> <p>Balance due July 4, 2026</p> <p>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.</p>	<p>Any dietary restrictions or allergies? _____</p> <p>Japan eating establishments take dietary concerns seriously. Please be specific i.e.. dietary restriction or intolerance or allergy? How severe? _____</p>
<p>Cancellation</p> <p>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.</p> <p>Indicate here if you will NOT be purchasing travel insurance _____</p>	<p>Roommate Request _____</p> <p>Signature _____</p> <p>PRINT NAME _____</p> <p>Date _____</p> <p style="text-align: right;"><i>Thank you!</i></p>