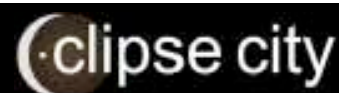


Where the moon mates the sun



Booking Sheet for Program 2:
Eclipse-City along The Great Wall

PERSONAL DETAILS (Please fill out your details. People accompanying shall fill out page 2)

| | | | | | |
|-------------|--|----------------|--|--------------|--|
| First Name: | | Middle Initial | | Second Name: | |
|-------------|--|----------------|--|--------------|--|

| | | | | |
|---|----------------|--|------------------|--|
| Gender: Male <input type="radio"/> Female <input type="radio"/> | Born on d/m/y: | | In City/Country: | |
|---|----------------|--|------------------|--|

| | | | | | |
|--------------|--|------------------|--|-------------------|--|
| Nationality: | | Passport Number: | | Issued in (city): | |
|--------------|--|------------------|--|-------------------|--|

| | | | |
|----------------------------|--|-------------------------------|--|
| Passport Issue Date d/m/y: | | Passport valid through d/m/y: | |
|----------------------------|--|-------------------------------|--|

Please do also provide a scanned copy of your passport and send this to passport@eclipse-city.com for your visa invitation

CURRENT ADDRESS

| | | | | | |
|--------|----------|------|---------|-----------|--------|
| Street | ZIP Code | City | Country | Telephone | e-mail |
|--------|----------|------|---------|-----------|--------|

NAME OF PERSON WE SHOULD CONTACT IN CASE OF EMERGENCY (for you and accompanying travellers)

| | | |
|-----------|----------------------------------|----------------------|
| Full Name | Relationship (spouse, mother...) | Phone (incl. Prefix) |
|-----------|----------------------------------|----------------------|

TRAVEL DETAILS

I want to book program code (all prices are in Euro)

| Program 2: Along the Great Wall | Number of travellers | Price / Person | with Single Supplement | Total |
|---------------------------------|----------------------|----------------|------------------------|-------|
| Program 2 Double (Code: 2-D) | | 2 490,00 € | | |
| Program 2 Single (Code: 2-S) | | | 2 840,00 € | |
| Total | | | | |

I HAVE READ AND ACCEPT ECLIPSE-CITY'S TERMS AND CONDITIONS PUBLISHED ONLINE (APRIL 2007)

Full Name / Date and Place / Signature

Please (a) sign this document AND (b) fax it or email it to us
Upon receipt of your booking, we will send you an invoice

PERSONAL DETAILS (People accompanying the main traveller) (2nd)

| | | | | | |
|----------------|--|----------------|--|--------------|--|
| First Name(s): | | Middle Initial | | Second Name: | |
|----------------|--|----------------|--|--------------|--|

| | | | | |
|---|----------------|--|------------------|--|
| Gender: Male <input type="radio"/> Female <input type="radio"/> | Born on d/m/y: | | in City/Country: | |
|---|----------------|--|------------------|--|

| | | | | | |
|--------------|--|------------------|--|-------------------|--|
| Nationality: | | Passport Number: | | Issued in (city): | |
|--------------|--|------------------|--|-------------------|--|

| | | | |
|----------------------------|--|-------------------------------|--|
| Passport Issue Date d/m/y: | | Passport valid through d/m/y: | |
|----------------------------|--|-------------------------------|--|

PERSONAL DETAILS (People accompanying the main traveller) (3rd)

| | | | | | |
|----------------|--|----------------|--|--------------|--|
| First Name(s): | | Middle Initial | | Second Name: | |
|----------------|--|----------------|--|--------------|--|

| | | | | |
|---|----------------|--|------------------|--|
| Gender: Male <input type="radio"/> Female <input type="radio"/> | Born on d/m/y: | | in City/Country: | |
|---|----------------|--|------------------|--|

| | | | | | |
|--------------|--|------------------|--|-------------------|--|
| Nationality: | | Passport Number: | | Issued in (city): | |
|--------------|--|------------------|--|-------------------|--|

| | | | |
|----------------------------|--|-------------------------------|--|
| Passport Issue Date d/m/y: | | Passport valid through d/m/y: | |
|----------------------------|--|-------------------------------|--|

PERSONAL DETAILS (People accompanying the main traveller) (4th)

| | | | | | |
|----------------|--|----------------|--|--------------|--|
| First Name(s): | | Middle Initial | | Second Name: | |
|----------------|--|----------------|--|--------------|--|

| | | | | |
|---|----------------|--|------------------|--|
| Gender: Male <input type="radio"/> Female <input type="radio"/> | Born on d/m/y: | | in City/Country: | |
|---|----------------|--|------------------|--|

| | | | | | |
|--------------|--|------------------|--|-------------------|--|
| Nationality: | | Passport Number: | | Issued in (city): | |
|--------------|--|------------------|--|-------------------|--|

| | | | |
|----------------------------|--|-------------------------------|--|
| Passport Issue Date d/m/y: | | Passport valid through d/m/y: | |
|----------------------------|--|-------------------------------|--|

PERSONAL DETAILS (People accompanying the main traveller) (5th)

| | | | | | |
|----------------|--|----------------|--|--------------|--|
| First Name(s): | | Middle Initial | | Second Name: | |
|----------------|--|----------------|--|--------------|--|

| | | | | |
|---|----------------|--|------------------|--|
| Gender: Male <input type="radio"/> Female <input type="radio"/> | Born on d/m/y: | | in City/Country: | |
|---|----------------|--|------------------|--|

| | | | | | |
|--------------|--|------------------|--|-------------------|--|
| Nationality: | | Passport Number: | | Issued in (city): | |
|--------------|--|------------------|--|-------------------|--|

| | | | |
|----------------------------|--|-------------------------------|--|
| Passport Issue Date d/m/y: | | Passport valid through d/m/y: | |
|----------------------------|--|-------------------------------|--|

Please do also provide a scanned copy of your passports and send these to passport@eclipse-city.com for your visa invitation

I HAVE READ AND ACCEPT ECLIPSE-CITY'S TERMS AND CONDITIONS PUBLISHED ONLINE (APRIL 2007)

| | |
|---|---|
| _____ (2nd) Full Name / Date and Place / Signature | _____ (4th) Full Name / Date and Place / Signature |
| _____ (3rd) Full Name / Date and Place / Signature | _____ (5th) Full Name / Date and Place / Signature |