



# ENLIST NOW

## BOOK YOUR D-DAY MEMORY TOUR

### AUTHENTIC REGISTRATION FORM

**JPP Holdings, LLC**

800 Jeffery street, suite 211  
BOCA RATON, FL 33487  
FLORIDA – UNITED STATES  
T:001 561-409-4036  
Toll Free: 1-844-276-1611  
Fax: 1-844-549-1643  
email: info@ddmtusa.com



#### TRAVELER INFORMATION

Title	First name	Last Name (same on your passport)	Date of birth	Nationality

#### CONTACT INFORMATION

Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP: \_\_\_\_\_ Country: \_\_\_\_\_

State: \_\_\_\_\_ e-mail: \_\_\_\_\_ Emergency contact Name and Phone: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

#### SELECT YOUR TOUR (Check the box)

<input type="checkbox"/>	<p><b>AUTHENTIC</b> (07 days) Full Immersion Price Per Pers.  <b>\$4,850.00 +450 single - \$5,450 for D-DAY Anniversary</b>            This tour offers the first and last night in a comfortable place, and four nights in your US Camp to live the unique D-Day Experience.</p>
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#### ROOMS ( Check the box)

Single 1 bed 1 pers. With sup. <input type="radio"/>	Twin 2 beds for 2 pers. <input type="radio"/>
Double 1 bed for 2 pers. <input type="radio"/>	Other option accept to share a room. <input type="radio"/>

#### PERSONAL INFORMATION (for your equipment )

Shoes size: \_\_\_\_\_ Pant size: \_\_\_\_\_

Shirt size: \_\_\_\_\_ Head size : \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

#### PAYMENT INFORMATION

<b>PAY BY CREDIT CARD</b>		<b>PAY BY CHECK TO JPP HOLDINGS, LLC</b>	
<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	Amount Check enclosed deposit or full amount of: \$ _____		
I Allow Jpp Holdings LLC, to charge my deposit or Full amount \$: _____			
Credit card number: _____		Number of travelers: _____	
Name of cardholder: _____		Please make check payable to Jpp Holdings, LLC, mail or fax or e-mail this form to adress framed on this page	
Exp. date: _____	CVV code _____		

#### PASSPORT INFORMATION

Number : \_\_\_\_\_ Del.date: \_\_\_\_\_ Exp.date: \_\_\_\_\_

#### DECLARATION

I confirm that I am over 18 years old of age and on behalf of the other cutomers named on this form. I acknowledge the contract Terms and condition on the reverse of this form and agree with them.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yy)

Use this form or make a copy to file your booking information

JPP holdings, LLC, is registered with the state of Florida as a seller of travel, ref No.ST40723

CALL US AT 1-844-276-1611