

NEW HORIZON TOURS
RESERVATION FORM
(805)499-Skii

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Reservation Form – Kenya
August 21-Sept. 3, 2025

SOT #2031736-40

All monies received are deposited into a trust account.

Name (as on passport) Date of Birth (MM/DD/YYYY) Male Female

Address City ST Zip

Phone Number: Club/Organization

Roommate Preference: E-mail address:

**I have read and agreed to all the terms under cancellation penalties below.
We recommend trip cancellation insurance.**

Signed: _____

Check all that apply: _____ Snorer _____ Non-Snorer _____ Smoker _____ Non-Smoker

MASTERCARD/VISA/AMEX WELCOME: Add 3.5% on credit card on all credit card fees

Card: Card Number: _____ Expiration Date: _____

CVC Code _____

Name on Card: _____ Total Amount: _____

Check Enclosed Amount _____ or Zelle Amount _____

Please make checks payable to New Horizon Tours. There is a \$15.00 charge for all returned checks.

Mail or e-mail this page to:
New Horizon Tours • 490 Rudolph Dr. Newbury Park, CA 91320-4630
E-mail: nhtours@yahoo.com
Tel: 1-805-499-SKII (7544)