Louix Dor Dempriey Foundation

New Year's Eve Retreat – (29 December 2017 - 3 January 2018)

Personal Details	Additiona	al Information	Form
Name:			
			Country:
Room Share (if applicat	ble)		
I have a friend/partner w	ith whom I would like to	share my room: Nan	(Room assignments cannot be guaranteed.)
Flight Details (if applic	able)		
If you are traveling from	outside of your home co	untry, please provide	us with your passport details:
Passport No.:	Passport Expiry Date:		
If you are flying during a	any portion of your journe	ey, please specify the	following:
ARRIVAL: Which cit	y/airport is your final des	stination?	
Airline:	Flight No.:	Arrival Time:	AM/PM Date://2017
DEPARTURE: From	which city will you depa	art?	
Airline:	Flight No.:	Departure Time	: AM/PM Date://2018 Day Month
Ground Transportatio	n Details (to and from	m Country Place)	
How are you getting to C	•		
	_	g my own car	
If you are not driving or			traveling?
Accommodation (befor	e and after the retreat))	
Please let us know where	e you will be staying befo	ore and after the retrea	at, if applicable.
			Tel: ()
Lodging (after):		City:	Tel: ()
How did you hear about u	us?		

Please return completed form to: Louix Dor Dempriey Foundation • 25401 Alicia Parkway., #L407, Laguna Hills, CA 92653 Phone: +1 (888) 288-3735 • Fax: +1 (949) 269-0113