



American Football Worldwide

JB Sports Enterprises, Inc.

ITALY 2018 International Competition Tour – FAMILY/FAN/STAFF Registration

PERSONAL INFORMATION – Full Legal Name, etc. (as listed on Passport or will be listed on Passport)

(First): _____ (Middle): _____ (Last): _____

Address: _____ e-mail: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

Participating Son's Name and HS: _____

TRAVEL INFORMATION (fill out what is possible at this time)

Intended Overseas Flight Travel (circle): Group NY Group Chicago Group LA Land Only Meet in Rome TBD

Passport No: _____ City, State, Country of Birth: _____

Date of Issuance: _____ Expiration Date: _____ Birthday: ____/____/____

Potential Roommate: _____ Traveling with other family members? Yes _____ No _____

If yes, list other family: _____

Emergency Contact: _____ Phone: (____) _____ Relationship: _____

DEPOSIT & PAYMENT: I am enrolling to participate in the American Football Worldwide tour to Italy from April 15 – April 23, 2017. With signature below I acknowledge reading the Travelers Information document that outlines the cost, donation/payment timeline and cancellation policies for this trip. With this **\$350 deposit** (\$150 non-refundable if enrollee cancels), I confirm my participation and will abide by the trip organizer's policies.

_____ I am traveling with the group out of (circle one) New York / Chicago / LA

_____ I will be making my own flight arrangements and will be meeting the tour group in Rome on the date of arrival in accordance with the terms in the Travelers Information document. The base price of my trip will be \$2695 if all paid in cash.

Signature: _____ Date: _____

_____ Attached/Enclosed is my check/money order for \$350 made out to "**American Football Worldwide**" (AFW), or

Credit Card No : _____

Name on Card: _____

_____ I authorize AFW/JB Sports to charge the listed credit card \$350. I will make arrangements for future payments or donations in accordance with the installation payment plan outlined in the Traveler Information document.

Type (D, V, AE) Expiration: ____/____ Scrty Code: _____

Signature: _____

Date: _____

_____ I authorize JB Sports Enterprises/American Football Worldwide to charge the listed credit card \$350 now and for all future installments in accordance with the due dates listed in the Travelers Information document.

Mail this Registration Form and payment to: American Football Worldwide, 4930 35th Avenue, Moline, IL 61265
Alternatively, scan and send to jb@americanfootballworldwide.com . Credit card information can be called in and questions can be answered at 309-781-7274