



REUNION IN KOREA APPLICATION FORM

USFK Personnel and Their Family Members

**** Please Print ****

Application date _____

1. Please check the ‘Reunion in Korea 2008’ program option you wish to participate in:

4 days package (air+hotel+tour) ? 4 days (hotel+tour) package ? 4 days (air+tour) tour ?

2. Please provide family member’s information below – *please provide name info as appears in passport.*

Last Name	First Name	Middle Initial	Male/Female	DOB (mm/dd/yyyy)
Home Address:	City	State	Zip	Tel # ()
Relationship to Sponsor:	Email Address:			

** If a family member has any handicap/disability that restricts activity, please indicate with ASTERISK next to name.*

*** If more family members will be joining the Reunion in Korea tour, please make a copy of this page.*

****** A separate application form is required for each family member and a \$100 deposit must accompany each application form. (Deposit is not refundable)***

3. Requested Flight information / US Departure

City/State of Departure:	Airport Name:
Wish to depart US on: (date)	Wish to return from Korea on: (date)

***Please note, flights on dates you choose may not be available and other dates may need to be requested.*

4. Accommodation / Type of Room Preferred:

- | | |
|---|-----------------|
| ? Single (one single bed)
(Single Occupancy payment required) | Quantity: _____ |
| ? Twin (two single beds) | Quantity: _____ |
| ? Double (one double bed) | Quantity: _____ |
| ? Triple (one double bed + one single beds)
(Triple Occupancy) | Quantity: _____ |

Please provide special requests regarding room sharing: _____

5. Extended Stay Request:

If you will be arriving earlier or staying longer than the four day tour and would like to stay at the Sofitel Ambassador Hotel, what are the additional dates for your reservation? _____



6. Deposit Information (Deposit is not refundable.)

A \$100 deposit per person is required. If mailing the deposit, a check, money order, or credit card payment is accepted. The above payment methods, in addition to cash payment, are accepted if delivering the deposit in person to USO Korea. Deposit payment method:

Check* Money Order* Credit Card Cash**

(Credit card: There will be a service fee of 2.5% of the total to cover the cost of the U.S bank line service. This also applies to refund.)

*Make money order or personal check payable to USO Korea.

**Do not mail cash!

Type of credit card (Only MasterCard and Visa are accepted):		Issuing Bank:
<input type="checkbox"/> MC	<input type="checkbox"/> Visa	
Credit Card Number:	Exp. Date:	Signature:

7. Sponsor Information

Last Name:	First Name:	M. Initial:	Rank:	DOB (mm/dd/yyyy)
Organization/Unit:	Mailing Address:			
Office phone #:	Home phone #:	Cell phone #:		
()	()	()		
PCS date (mm/yy)	Email address:	Signature:		

Will the sponsor be participating in the 4-day tour package (Hotel+Tour)? Yes No

Will the sponsor be participating in the 4-day tour (Only Tour/No Breakfast)? Yes No

Will the sponsor be participating in the banquets? Monday Tuesday Thursday

8. Further instructions

(1) Send this application form and payment to:

USO Seoul
ATTN: Reunion Program
PSC 303, BOX 53
APO AP 96204-0053

(2) Do not mail cash.

(3) Type or print all entries clearly

(4) Be sure all names and addresses are complete, accurate and readable.

Tickets and information are e-mailed based on information in this application

(5) If more forms needed, local reproduction permitted.

(6) If you want to join dinners (the 1st night & the 2nd night) or luncheon (the 4th night), please reserve and pay at least 10 days before the program.

9. Questions or comments?

Call the USO Korea Reunion in Korea office.

DSN: 723-4102 or 723-4130

Commercial: (82.2) 7913-4102 or (82.2) 7913-4130

Email: Ms. Youn, Geeyoung at geeyoung.youn@korea.army.mil or

Ms. Lee, Im -kyung at usoreunion@yahoo.com