

Reservation Form

AZABU-YA Trip to Japan, 2008

Name in Full (as shown in passport):

Address:

City State Zip

E-Mail Address: _____

Telephone Numbers:

Daytime: (_____) _____ - _____

Evening: (_____) _____ - _____

Fax Numbers: (_____) _____ - _____

Best time and days to be reached: _____

Comments/requests/questions:

Food allergies? _____

Emergency Contacts:

1. _____

2. _____

Print this form out, fill it in and mail it to:

MK Concepts, LLC, 3019 Pico Blvd., Suite 5, Santa Monica, CA 90405.

To hold your reservation, please include a check for \$300.00, made out to MK Concepts, LLC. A processing fee of \$30.00 will be withheld should your reservation fee be refunded.

Tel: 310-828-8046 - Fax: 310-828-8267

E-Mail: mariko@azabu-ya.com