

Application Form



Please fill out this form, make a copy, and mail original to:

England Detecting Adventure!
594 50th Avenue South East
Rochester, MN 55904

Required fields are marked
with a asterisk (*)

Note: Completed application form is required with deposit. Each Person in your party must register separately.

* Name _____

* Street Address _____

* City _____ * State _____ * Zip Code _____

* Home Phone _____ Business Phone _____

* Email _____ * Birth Date _____

* Passport Expiration Date (required) (ex: MM-DD-YY) _____

Air from what city? _____

Preferred Airline _____ Frequent Flyer Number _____

Type of metal detector you will bring _____

Note: Metal detector will be provided if you do not bring your own

I request the 7 day tour

I request the 10 day tour

Departure Date (ex: MM-DD-YY) _____ Return Date _____

Payment Options:

I will submit \$400 to hold my spot by mailing a check today

I elect to pay in full now by mailing a check today (See Payment Center Page at www.metaldetectingtours.com)

Special needs, requests: _____

* I have read and agree to the terms, conditions, and responsibilities of the program yes no

* Signature _____ * Today's Date _____

Please watch for information that will be mailed to you. We look forward to seeing you on the Tour!

Thank you!