School Trip to Japan Inquiry Form

\*Required

1. Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| First Name\* |  | Last Name\* |  |
| School Name\* |  |
| Country\* |  | City\* |  | City\* |  |
| Email Address\* |  |
| Phone Number\* |  |

1. Trip Information

|  |  |
| --- | --- |
| Number of People | Students ( ), Teachers ( ), Others ( ) |
| Number of StudentsBy Grade | Grade 10 ( ), Grade 11 ( ), Grade 12 ( ) |
| Trip Duration | ( ) Days |
| Preferred Departure Date(YYYY/MM/DD) |  / /  | Preferred Arrival Date(YYYY/MM/DD) |  / /  |
| Destination(Kyushu Area) |  [x] Oita (APU) [ ] Fukuoka [ ] Kumamoto [ ] Miyazaki[ ] Kagoshima [ ] Nagasaki [ ] Saga |
| Other Preferred Destination | [ ] No [ ]  Yes→( ) |
| Preferred Food andSpecial Dietary Requests |  |
| Preferred Activities |  |
| Estimate Budget | (Excluding flights to and from Japan.) ( ) Yen/person or ( ) USD/person |
| Tour Guide | [ ] I don’t need a tour guide.　　[ ] I need a tour guide.↓ |
| 1. Language | [ ]  English or Chinese [ ]  Other Languages |
| 2. Guide Availability | [ ]  Within Japan [ ]  Entire Trip Including To and From Japan |
| Questions/Comments |  |

For Office Use Only

|  |  |  |  |
| --- | --- | --- | --- |
| Received by APU on | / / | APU Representative |  |
| Inquiry Number |  |
| Received by GMT on | / / | GMT Representative |  |