



**SECOND (INDIANHEAD) DIVISION ASSOCIATION,
INC. KOREA 1965 50TH ANNIVERSARY RETURN**

(UPDATE 03/10/15)



Last Name _____ First _____ MI _____

Are you a member of the 2nd Division Association: Yes No

Address: _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ **E-Mail*** _____

*- CRUCIAL FOR IMMEDIATE TOUR UPDATES

Passport Information Name as it appears on Passport _____

Veterans Passport# _____ Exp Date _____ Date of Birth (DOB) _____

Companion Name/Relationship _____ DOB _____

Companion's Passport# _____ Exp Date _____

NOTE: If you do not have a passport with 6 months validity after last date of return to USA and have applied for a new one, please insert "Applied for" in the space provided and contact MHT when you receive it.

Airport Information (If help is required to acquire international airline connections)

Nearest Airport _____

Veteran's Korean Service Information

Branch of Service _____ Unit _____

Period of Service in the Korean Theater (month/year) from _____ thru _____

Veterans / Family Member Signature _____ **Date** _____

Complete and mail this form along with the \$450.00 deposit / service-fee per person (check, money order or Credit Card) to Military Historical Tours. Payment in full is required for applications submitted within sixty days of tour departure.

Credit Card Authorization

I authorize **Military Historical Tours** by my signature above to charge my Visa, Master Card or Amex **\$450.00** Per Person,

The amount of **\$450.00** Per Person Credit Card # _____

Expiration Date: _____ **Please** include the 3-Digit code on back of card _____

Name as it appears on the Credit Card _____

Please send all material to:

**SECOND INFANTRY DIVISION ASSN RETURN
C/O MILITARY HISTORICAL TOURS
13198 CENTERPOINTE WAY STE #202
WOODBIDGE, VA 22193-5285**

**Phone: 703-590-1295 or 800-722-9501
Fax: 703-590-1292
E-Mail: mhtours@miltours.com
www.miltours.com**