



**EMERGENCY CONTACT INFORMATION FOR**  
**SWAIN TOURS TRAVELERS**

In the event of an emergency while traveling, Swain Tours requests that you complete the details below so that we may advise a preferred contact of your situation. Please complete the attached form and FAX to 610 896 9592. Or, visit [www.swaintours.com/emergency](http://www.swaintours.com/emergency) to complete the information online.

I booked my tour with a travel agent (not directly with Swain Tours)

Passenger's Name 1: .....

Passenger's Name 2: .....

Passenger's Name 3: .....

Passenger's Name 4: .....

Passenger's Name 5: .....

Passenger's Name 6: .....

Departure Date: .....

**Your Contact Details (prior to departure):**

Address: .....

State: ..... State: ..... Zip: .....

Telephone Contact: .....

Email: .....

**Your Preferred Emergency Contact (whilst traveling):**

Name: .....

Relationship: .....

Telephone Contact: .....

Email: .....

I elect not to provide emergency contact details:

Name: .....

Swain Reference: .....SW.....