



Early Interest Form

Date Submitted: _____

Name(s): (Please indicate preferred salutation below Mr./Mrs./Ms./Dr.)

#1 _____ Tufts School/Year: _____

#2 _____ Tufts School/Year: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Cell Phone #: _____

Email Address: _____

Trip Title: _____ Trip Date: _____

Cabin Category Preferences: #1 _____ #2 _____

Single Travelers Only:

I plan to share accommodations with _____

I wish to have single accommodations

I would like to know about possible roommates

Comments & Questions:

Please mail form to: Tufts Travel Learn Program, 80 George St., Medford, MA 02155 or e-mail: travel-learn@tufts.edu

Contact: Tufts Travel-Learn Program 617-627-0633 or travel-learn@tufts.edu

****Please note that this is not a confirmation of a reservation.***

For a complete list of our programs, visit our website: www.tuftstravellearn.org