

TRIP APPLICATION FORM

Trip Destination: _____ Trip Dates: _____

Full Name: (as listed on your passport) _____

Occupation: _____ Sex: _____ Height: _____ Weight: _____ Birthdate: _____

Birthplace: _____ Citizenship: _____

Mailing Address: _____

Passport #: _____ Date of Issue: _____ Place of Issue: _____ Expiration: _____

Home phone: _____ Business phone: _____ Fax: _____ Email: _____

In case of Emergency Please Notify: (Name/Phone) _____

AIR TRANSPORTATION: if you have flights booked already, please provide the details:

Arrive: _____ on flight # _____ on (date) _____

Depart: _____ on flight # _____ on (date) _____

I would like Hidden Treasure Tours to handle my air arrangements: Yes No

ACCOMMODATIONS: Prices are based on double occupancy. Single rooms are not always available and occasionally, even when they are confirmed, hotels may not provide them on arrival. In that case, the single supplement will be refunded after you return home.

I will share a room with _____ I prefer a single room. I am a smoker. I am a nonsmoker.

Please describe your background in outdoor activities and travel: _____

How did you hear about Hidden Treasure Tours? _____

Please charge my deposit/final payment to: (circle one) Visa/Mastercard/AMEX/Discover Account# _____

Name on card: _____ Expiration date: _____ Signature: _____

Disclaimer

In offering the sale of this tour, Hidden Treasure Tours strongly recommends you purchase insurance coverage which will provide coverage against many different potential problems that could affect the trip. Please read our terms and conditions carefully.

Our staff is ready, willing and able to answer any question you may have concerning the terms and conditions or to obtain answers for you with regard to the insurance, if they are not readily available. Agency policy requires our clients to either accept or decline the insurance and sign below to indicate that it has been offered and the terms and conditions accepted.

I [We] hereby acknowledge receipt of a copy of this disclaimer and terms and conditions and further state that I [we] understand its terms and provisions. I [We] also acknowledge that any questions I [we] had concerning this disclaimer have been answered to my [our] full satisfaction. I [We] further understand and acknowledge that I [we] am/are under no obligation to sign this disclaimer, but having signed it, am/are bound to its terms.

Signed: _____

I accept the insurance coverage.

Dated: _____

I decline the insurance coverage.