

Land Tour Registration Form

(Enter Vendor, Date & Destination)

Vendor: _____ Date: _____ Dest: _____

1st Passenger: Legal name **Exactly** as it appears on your Passport:

First _____ Middle: _____ Last: _____

Date of Birth: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell: _____

Passport # _____

Issue Date: _____

Expiration Date: _____

US Citizen: Yes _____ No _____

Frequent Flyer # _____

Known Traveler # _____

Airline Seat Preference: Aisle _____ Window _____ Next to _____

Travel Insurance Quote: Yes _____ No _____ **Travel Insurance is Highly Recommended**

.....
2nd Passenger: Legal name **Exactly** as it appears on your Passport:

First _____ Middle: _____ Last: _____

Date of Birth: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell: _____

Passport # _____ Issue Date: _____

Expiration Date: _____ US Citizen: Yes _____ No _____

Frequent Flyer # _____

Known Traveler # _____

Neither Sun City Community Association (herein, called SCCA) or Heavenly Holiday Travel, LLC (herein, called HHT) nor its agents or representatives will be responsible for any injury, loss or damage that may occur to the Traveler or Traveler's property from any cause whatsoever. Under no circumstances will SCCA or HHT be liable for items or other incidental or consequential damages. SCCA or HHT shall not be liable for failure to perform its obligations under this contract as a result of strikes, riots, acts of God, or any other cause beyond its control. There is no other agreement or warranty between the Traveler and SCCA or HHT except as set forth in this document. The rights of SCCA or HHT under this contract shall not be deemed waived except as specifically stated in writing and signed by an authorized officer of SCCA. This contract shall be governed by Texas State Law.

Acknowledge Signature 1st Passenger: _____

Acknowledge Signature 2nd Passenger: _____

Credit Card Authorization Form

PLEASE COMPLETE THIS CREDIT CARD AUTHORIZATION FORM

Cardholder Name: _____

Cardholder Name exactly as it appears on your credit card

Billing Street Address: _____

State: _____ Zip Code: _____ Phone: _____

Credit Card Type: Visa _____ Master Card _____ AMEX _____

Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Email Address: _____

Charge Amount: \$ _____ (USD)

1st Passenger Name: _____ Birth Date: _____

2nd Passenger Name: _____ Birth Date: _____

Verify names on the passport and booking documents match exactly and are spelled identically/correctly.

Check Air Seat Request

Air Seat Request: Aisle _____ Window _____ Next to _____

Cardholder – Sign, Date, and Print Name below:

Signed: _____

Dated: _____

Print Name: _____

I authorize my Travel Agent and Heavenly Holiday Travel, LLC to charge the above listed travel services for the above listed person(s) to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Frequent Flyer Number: _____

Frequent Flyer Number: _____

KNOWN Traveler Number: _____

KNOWN Traveler Number: _____

Complete and return these forms to SC Lifestyle/Activities office located at 2 Texas Drive, Building A