

## EXTENSION REGISTRATION FORM



Please return this form no later than 90 days prior to departure. Extension registrations received after this deadline are subject to space availability and are based on a minimum number of participants required. Please note you must be registered on the original program to participate on the extension. If you are handling your own air arrangements, please request a sample air schedule to assist you in booking.

### PROGRAM INFORMATION

Destination \_\_\_\_\_ Leader name \_\_\_\_\_ Departure date      /      /       
mm dd yyyy

### PARTICIPANTS (Please print)

Primary Traveler's First \_\_\_\_\_ Last \_\_\_\_\_

Guest Traveler's First \_\_\_\_\_ Last \_\_\_\_\_

### PARTICIPATION

Yes, I want to participate in the program extension to \_\_\_\_\_.

I/we agree to pay the additional charge of \$ \_\_\_\_\_

*Please complete a separate extension form if registering on more than one optional extension.*

### ROOMING INFORMATION

Please check one:  Assign me a roommate  I will room with \_\_\_\_\_  Single room only  
(Supplement will be charged)

Please check one:  Two twin beds  One double bed

Please check one:  Non-smoking  Smoking  No preference

### PRIMARY TRAVELER'S PAYMENT Please choose one:

I will send a check for payment to Nanda Journeys (500 Cathedral Dr #2377, Aptos, CA 95001) for total amount due.

I will make a PayPal payment, by logging into my PayPal account and sending a payment to Nicola@NandaJourneys.com, for the total amount due.

### GUEST TRAVELER'S PAYMENT Please choose one:

I will send a check for payment to Nanda Journeys (500 Cathedral Dr #2377, Aptos, CA 95001) for total amount due.

I will make a PayPal payment, by logging into my PayPal account and sending a payment to Nicola@NandaJourneys.com, for the total amount due.

### AUTHORIZATION

I/we understand that enrollment on this extension is subject to the same Booking Conditions under which I/we enrolled on the program.

Signature \_\_\_\_\_ Date      /      /       
mm dd yyyy

Guest signature \_\_\_\_\_ Date      /      /       
mm dd yyyy



**Return this form either by email, fax, or mail to the contact info listed below.**

**Email:** Info@NandaJourneys.com | **Fax:** 888.747.7501 | **Mailing address:** 500 Cathedral Dr #2377, Aptos, CA 95001