

# TRAVELER REGISTRATION



Please read the booking conditions and detailed itinerary carefully before completing this form. Complete and email to **Info@NandaJourneys.com**. A \$500 per person deposit is due when submitting this application (via check or credit card). Be sure to complete the guest/additional traveler section for anyone traveling with you on this trip.

Tour name \_\_\_\_\_ Leader \_\_\_\_\_ Tour date     /    /      
mm dd yyyy

## PRIMARY TRAVELER INFORMATION

Title \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_  
(Preferred name)

Credentials \_\_\_\_\_ Job title \_\_\_\_\_ Employer \_\_\_\_\_

**MAILING ADDRESS** *(Please provide primary/preferred address for any materials - no P.O. box)*  Home  Business

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**CONTACT INFORMATION** *(Please indicate with check mark your preferred choice for being contacted)*

Home \_\_\_\_\_  Cell \_\_\_\_\_  Work \_\_\_\_\_

Email \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION** *(Make sure it is not someone traveling with you)*

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Primary phone \_\_\_\_\_ Secondary phone \_\_\_\_\_

**PASSPORT INFORMATION** *(Please send/email a copy of the picture page of your passport before travel)*

Name \_\_\_\_\_ Birth date     /    /      
(Your name **exactly** as it reads on your passport) mm dd yyyy

State/Country of birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Passport # \_\_\_\_\_ Expiration date     /    /     Issuing authority \_\_\_\_\_  
mm dd yyyy

Gender  Male  Female

## TRAVELER 2 INFO

Title \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_

**PASSPORT INFORMATION** *(Please send/email a copy of the picture page of your passport before travel)*

Name \_\_\_\_\_ Birth date     /    /      
(Your name **exactly** as it reads on your passport) mm dd yyyy

State/Country of birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Passport # \_\_\_\_\_ Expiration date     /    /     Issuing authority \_\_\_\_\_  
mm dd yyyy

Gender  Male  Female

# TRAVELER REGISTRATION



## TRAVELER 3 INFO

Title \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_

### PASSPORT INFORMATION *(Please send/email a copy of the picture page of your passport before travel)*

Name \_\_\_\_\_ Birth date     /    /      
*(Your name exactly as it reads on your passport)*

State/Country of birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Passport # \_\_\_\_\_ Expiration date     /    /     Issuing authority \_\_\_\_\_  
*mm dd yyyy*

Gender  Male  Female

## TRAVELER 4 INFO

Title \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_

### PASSPORT INFORMATION *(Please send/email a copy of the picture page of your passport before travel)*

Name \_\_\_\_\_ Birth date     /    /      
*(Your name exactly as it reads on your passport)*

State/Country of birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Passport # \_\_\_\_\_ Expiration date     /    /     Issuing authority \_\_\_\_\_  
*mm dd yyyy*

Gender  Male  Female

## TRAVELER 5 INFO

Title \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_

### PASSPORT INFORMATION *(Please send/email a copy of the picture page of your passport before travel)*

Name \_\_\_\_\_ Birth date     /    /      
*(Your name exactly as it reads on your passport)*

State/Country of birth \_\_\_\_\_ Citizenship \_\_\_\_\_

Passport # \_\_\_\_\_ Expiration date     /    /     Issuing authority \_\_\_\_\_  
*mm dd yyyy*

Gender  Male  Female

## TRAVELER AGREEMENT

### I/we hereby accept the role of traveler for Nanda Journeys. I agree to the following conditions:

- I/we have carefully read and understand the Booking Conditions and detailed itinerary before completing this registration form.
- I/we know that a \$500 per person deposit is due when submitting this application (via check or credit card). I/we have completed the guest/additional traveler section for anyone traveling with me on this trip.
- I am/we are familiar with the components of the Nanda Journeys trip and attest to my/our physical fitness and ability to actively participate in all activities.
- I/we understand that there will be risks, dangers, and hazards and I/we freely accept and fully assume all such risks.
- I/we understand that several payment options are available to meet my/our needs. I will contact Nanda Journeys at 888.747.7501 or Info@NandaJourneys.com to discuss which option is best for me/us.
- I/we attest, as indicated with my/our signature, that I/we have read and understand the Booking Conditions.

Primary Traveler 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