

# REGISTRATION FORM

Please complete both sides of this form and return along with your deposit to:

Walking Adventures International • PO Box 871000 • Vancouver WA 98687-1000 • USA

EMAIL: fun@walkingadventures.com • PHONE: 1.800.779.0353 • FAX: 360.260.1131

Completed registration form must be received by our office prior to accepting a traveler on any adventure!

## ADVENTURE SELECTION

Adventure name & dates

☐ Pre-tour or Extension, if applicable

## TRAVELER INFORMATION

Legal Name (as it appears on passport)

Legal Name (as it appears on passport)

Address

City / State / Zip

Home Phone

Cell Phone

Email

Name as you wish it to appear on your nametag

☐ Billing address same as mailing address

## TRAVELER DOCUMENT CHECKLIST

Please send us the following items:

- ☐ Registration Form (both sides completely filled out & signed)
- ☐ Passport copy (international trips)( photo page only)
- ☐ Airline itinerary (full itinerary, emailed or hard copy) *Please do not book airfare prior to receiving the Adventure Advice flyer!*
- ☐ Travel insurance details: 1) carrier, 2) policy name & policy number, 3) emergency contact information for your insurance company (an 800 number does not work from outside the USA)

## ADVENTURE T-SHIRT

Please indicate t-shirt size below to receive one complimentary t-shirt per traveler: (Unisex sizes: XS S M L XL XXL XXXL)

His: \_\_\_\_\_ Hers: \_\_\_\_\_

## ACCOMMODATIONS

- ☐ I would like help finding a roommate and authorize WAI to give my contact info to potential roommates
- ☐ I am traveling alone and would like the Single Supplement as listed in the Adventure brochure
- ☐ I have a roommate: \_\_\_\_\_  
Name of roommate

## ADVENTURE PRICING

Adventure price ..... \$ \_\_\_\_\_

Optional airfare offered through WAI (if applicable) \$ \_\_\_\_\_

Pre-tour or Extension price ..... \$ \_\_\_\_\_

Single Supplement ..... \$ \_\_\_\_\_

Number of travelers ..... X \_\_\_\_\_

TOTAL: Total Adventure price ..... \$ \_\_\_\_\_

## REGISTRATION DEPOSIT DUE NOW

\$500 per person (unless otherwise stated in brochure memo)

☐ Cash (check enclosed)

☐ Credit Card (VISA, MasterCard, or Discover)  
(Call us with your credit card details.)

Deposit currently authorized ..... \$ \_\_\_\_\_

## RESPONSIBILITY STATEMENT

Walking Adventures International ("WAI") sells tour programs consisting of travel services that WAI purchases from suppliers. The suppliers providing travel services for WAI's tour programs are independent contractors, not agents or employees of WAI. As such, WAI is not responsible for any negligent or willful act or failure to act of any supplier. By utilizing the travel services of the suppliers, I agree that I will look to such suppliers for any accident, injury, property damage, or personal loss to me, and that neither WAI nor any representative of WAI shall be liable. WAI is not responsible for any injury, loss, or damage to person or property in connection with the provision, or failure to provide any goods or services resulting from the following circumstances or any other circumstances outside the direct control of WAI: acts of God; acts of war or civil unrest; Insurrection or revolt; strikes or other labor activities; criminal or terrorist activities; overbooking or downgrading of accommodations or transportation; mechanical failure of vehicles; or lack of medical care. Furthermore, all services and accommodations are subject to the laws and regulations of the country in which they are provided. WAI reserves the right to use any photo we take or photos given to us by travelers for promotional activities unless you the traveler notify us otherwise. By signing this document, I agree to these conditions and affirm that I have read and agree with all conditions listed in the accompanying General Tour Conditions form.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Individual signature required for each traveler

Continued on reverse side of page ➡

Caption:

Description:

Dimensions: x