

# NEW ZEALAND'S NORTH & SOUTH ISLANDS November 3 - 19, 2022

# **GUEST REGISTRATION**

First Name	Middle Name		
Last Name	DOB:		
U.S. Citizen? YesNo I	f not, name country		
E-mail address			
Telephone (mobile)	Other		
Street Address			
City	State	Zip	
Country			
MEDI	CAL INFORMATION		
Emergency Contact Name			
Relationship to You			
Emergency Contact Address			
Emergency Contact Phone	Other		
Primary Care Doctor	Phone		
Allergies to Medications:			
Medical Insurance Information (in case	of an emergency):		
Insurance Company	Phone#		
Policv#	Group#		

#### Please provide Pack A Fork! with a copy of your current passport

# \_\_\_\_\_ I have attached a copy of my Passport and will enclose it with this Guest Registration form (or send by e-mail to <u>info@packafork.com</u>)

\* Note: Most countries require a passport to be valid 6 months past your travel dates. If you do not yet have a passport or if you are renewing your passport, please let us know when you have received it. We need a copy of it as soon as possible.

This trip is rated as 'moderate' for the activity level. There will likely be walking, standing, stair-climbing and walking up hill on uneven terrain during tours. There will be some easy kayaking. Do you have any physical conditions that could prevent you from participating in these activities? If so, please explain so we can make the appropriate modifications.

Tell us a bit about you..

What are your expectations for this trip?

What interests you most about this itinerary?

Are there any special events you will be celebrating during the tour (birthdays, anniversaries, etc.?

Do you have diet restrictions (vegetarian, gluten-free, vegan, etc.)? Please also list foods you do not like. We will find an alternative for you.

Any questions or concerns? Please describe here.

### Accommodations:

If you are sharing a room, please indicate his/her name \_\_\_\_\_

\_\_\_\_\_ I would like to have my own room (requires an additional single supplement)

If there is anything we should know regarding your rooming preferences, please indicate here:

#### **Arrival Information:**

Please select from the following regarding your arrival and departure information:

\_\_\_\_\_ I have made my own flight arrangements through Exito Travel or by another means and have forwarded a copy of my itinerary to Pack A Fork!

\_\_\_\_\_ I have not yet booked my flight arrangements, but will send Pack a Fork! a copy of my itinerary once I have done so.

#### Payment:

\_\_\_\_\_ Deposit/ \$2500

\_\_\_\_\_ Balance of Tour

\_\_\_\_\_ Payment In full/double occupancy

\_\_\_\_\_ Payment in full/single occupancy

Financial Terms & Conditions:

By signing below, I understand and agree to the Financial Terms & Conditions for this tour (posted on the website):

Signature\_\_\_\_

#### Travel Insurance:

\_\_\_\_\_ I will purchase travel insurance for this tour. *Note: We recommend purchasing travel insurance as soon as possible after tour booking. Due to COVID-19, we suggest purchasing a policy with 'Cancel for Any Reason' coverage.* 

\_\_\_\_\_ I will <u>not</u> purchase travel insurance for this trip.

Photo Release: I give my permission for Pack A Fork! LLC to publish tour photos/video where I could be present that could be used for marketing purposes.

Signature \_\_\_\_\_

By signing this Guest Registration form, I certify I have ready, understand and agree to the Financial Terms & Conditions and Consumer Disclosure Notice for this group tour.

Signature \_\_\_\_\_

*Please note:* This is a non-smoking trip. Smoking will not be allowed in hotels, on the coach or in other non-smoking designated areas.