

Trip Application Form

Golden Odysseys, Inc., 1308 5th Street, Golden, Colorado 80403

1-888-640-8200 Fax: 303-278-0434 Local 303-278-8200

Please print or type all information:

Name of Trip _____

Date of Departure _____

(Equestrian vacations require submission of additional separate form.)

Your Full Name (as it appears on your passport)

Mailing Address: _____

City _____ State _____ Zip _____

Home Phone _____ Office Phone _____

Mobile Phone _____

Fax _____ E-mail _____

Citizenship _____ Passport Number _____

Place of Issue _____ Date of Issue _____

Birthdate (month, Day, Year) _____

How did you hear about us? _____

Check all that apply:

I have a roommate. Name of Roomate _____

I am willing to share a double room. Smoker Non-Smoker

I prefer a single room at a supplemental cost.

I do not drink alcoholic beverages.

I will provide my own transportation.

I would like travel insurance information.

I would like Golden Odysseys to book a rental car. Days _____

Circle your choice of car size: economy, compact, mid-sized, full-sized

____ Please make plane reservations* from: _____
Seating Preference _____
(* Airline ticketing may be subject to an additional fee of up to \$50. Thank you.)

____ I have dietary restrictions. Explain: _____

____ I have allergies (please include food, medication and other allergies you may have)

Please tell us of any restrictions or medical conditions you may have that we should be aware of while you are traveling. (Asthma, Diabetes, Cumidin prescriptions, etc.)

In case of an emergency, please notify:

Address:

Phone: _____ Relationship: _____

Second Contact Name: _____

Phone: _____ Relationship: _____

Physician's Name: _____

Phone: _____

Address _____

Insurance Type _____

A complimentary Golden Odysseys, Inc., shirt will be given to each trip participant depending on availability. Please specify size.

____ Small (Men's 34-36, Women's 6-8) ____ Large (Men's 42-44, Women's 10-12)

____ Medium (Men's 38-40, Women's 8-10) ____ Extra Large (Men's 46-48, Women's 12-16)

Payment Information:

A deposit of at least 25% per participant is required at the time of booking to hold your place on a tour. We accept personal checks, money orders, Visa and Mastercard.

Account Number: _____ Expiration Date: _____

Card Holder's Name: (please print) _____

Card Holder's Signature: _____

Billing Address for Credit Card:

City _____ State _____ Zip _____

I understand that if my statements on this form are not factual, my reservation may be subject to adjustments or cancellation. My signature on this reservation form confirms my understanding of and agreement with the terms and conditions of a tour operated by Golden Odysseys, Inc.

Signature: _____ Date: _____

(If more than one person is registering, please fill out separate application forms. You cannot participate on a Golden Odysseys, Inc. tour unless we have a signed application and disclosure form from every potential trip participant.)