

# RESERVATION FORM

NATURE EXPEDITIONS INTERNATIONAL • 10915 W. BROWARD BLVD. • PLANTATION, FL 33324

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Please complete all pages of this form and sign it. All trip applicants must carefully read and sign the Liability Release Form. Use a separate form for each person in your party. Send with a deposit of \$500 per person or as directed by your travel consultant to NEI at 10915 W. Broward Blvd., Plantation, FL 33324. You may also send by e-mail or fax.

*Please print or type*

Trip Name \_\_\_\_\_ Departure Date \_\_\_\_\_

Full Name as it appears on your passport

Surname \_\_\_\_\_ Given Names \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Mobile Phone (\_\_\_\_\_) \_\_\_\_\_

Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Email \_\_\_\_\_ Occupation \_\_\_\_\_

State of Health \_\_\_\_\_

Diet Restrictions \_\_\_\_\_

Passport Number \_\_\_\_\_ Citizenship \_\_\_\_\_

Place of Issue \_\_\_\_\_ Issue Date \_\_\_\_\_ Exp. Date \_\_\_\_\_

Where or how did you hear about Nature Expeditions International?  
\_\_\_\_\_

Have you taken any previous trips with Nature Expeditions International? If so, which ones (with year)?  
\_\_\_\_\_

Please write your initials next to the instructions you wish us to follow.

\_\_\_\_\_ Please book and ticket all of my flights from my hometown or nearest airport.\*

Airport \_\_\_\_\_

\_\_\_\_\_ Please book and ticket all of my flights from the gateway city (e.g., LAX, MIA).\* I will make my own domestic flight arrangements.

\_\_\_\_\_ Please book and ticket only the internal flight(s) within the host country. I will handle all of my own domestic and international flight arrangements.

\* Surcharge will apply to all flights booked by NEI.

Circle Seating Preferences: First Business Coach Aisle Window Center

Frequent Flyer Program (if any):

1st Participant: Airline \_\_\_\_\_ Number \_\_\_\_\_

2nd Participant Airline \_\_\_\_\_ Number \_\_\_\_\_

3rd Participant Airline \_\_\_\_\_ Number \_\_\_\_\_

Circle Bed/Room Preferences: Two twins/doubles or One Matrimonial; Smoking or Non-smoking

I wish to room with \_\_\_\_\_

\_\_\_\_\_ I prefer a single room at supplemental cost.

\_\_\_\_\_ I prefer a room and/or hotel upgrade. If so, please detail your preferences.  
\_\_\_\_\_

**TRAVEL INSURANCE**

\_\_\_\_\_ Please provide me with a quote for comprehensive travel insurance based on my complete trip cost.

If you do not wish to purchase travel insurance, please read and sign the following:

Nature Expeditions International has offered and explained the benefits of travel protective services and I willingly exercise my right in foregoing these said benefits with the understanding that I am traveling at my own risk.

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

*(Parent or legal guardian must sign if under 18)*

**MEDICAL RELEASE**

Nature Expeditions International is not responsible for providing medical care, beyond general first aid, for trip members. In case of medical emergency, every effort will be made to insure the health and well-being of participants. Cost of emergency medical treatment will be the responsibility of individual participants and NEI urges participants to check medical coverage to make sure it is adequate. Some trips involve strenuous activity and hospital facilities are often remote or nonexistent. We may request a signed doctor’s recommendation certifying physical fitness if required by our local operators. Nature Expeditions International retains the right to disqualify anyone at any time during the trip if the leader feels it is medically necessary. Refunds are not normally given under such circumstances.

**I have read the Medical Release and agree to its provisions.**

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

*(Parent or legal guardian must sign if under 18)*

**LIABILITY RELEASE**

I have read the itinerary and related information pertaining to this trip which has been designed and is being conducted by Nature Expeditions International. I am aware of the terms and conditions of the trip involving refunds and cancellations, responsibility and liability. I understand that there are inherent dangers and risks that may occur with this trip, known or unknown, relating but not limited to air, bus, car and/or ship travel, nature walks and hikes, watercraft activity, swimming and scuba-diving, camera equipment, accidents and/or illnesses, and acts of nature, man or God.

In consideration of the right to participate in this trip, I hereby release Nature Expeditions International and their agents, associates, or related parties, from all responsibility for damages, injuries, losses, or delays due to any reason whatsoever and hereby assume all risks and dangers in connection with the trip.

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

*(Parent or legal guardian must sign if under 18)*

In Case of Emergency Please Notify

\_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

Please send my itinerary to the people listed below:

1) \_\_\_\_\_

2) \_\_\_\_\_

*(Name)*

*(Email)*

I have enclosed a deposit of \$ \_\_\_\_\_ for this trip. I understand that final payment is due 90 days prior to departure (or otherwise as required by our suppliers). The full terms and conditions are detailed on NEI’s website and in the General Information section of NEI’s detailed itineraries. I hereby affirm that I have read, fully understand and agree to abide by NEI’s terms and conditions.

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

*(Parent or legal guardian must sign if under 18)*