



Trip Registration Form

PRIMARY CONTACT DETAILS						
Name Street Address						
City	Prov/State	Country	Country Post Code			
Res Tel	Bus Tel		Cell Tel			
Email		Age H	eight	_Weight	_ Gender	
	ADDITIONAL	GUEST INFORMATIO	ON			
2	Email	Age	Height _	Weight	Gender	
3	Email	Age	Height _	Weight	Gender	
4	Email	Age	Height _	Weight	Gender	
5	Email	Age	Height _	Weight	Gender	
Rooming Preference -	(1 Bed, 2 Beds, etc.)		<u> </u>			
	 Willing to Share Please add additional trips or g 		·		•	
TRIP INFORMATION						
Trip Name #1	Date of Trip #1					
Trip Name #2	Date of Trip #2					
Trip Name #3	Date of Trip #3					
Trip Name #4	ame #4 Date of Trip #4					
I will be needing addition	onal personalized travel arrang	gements before or afte	r my trip -	□ Y □ N		





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CREDIT CARD PAYMENT AUTHORIZATION

This is to verify that I (print name)		hereby				
authorize Island Expeditions Co Ltd. to charge my credit card for a deposit amount of \$200 per person to confirm						
my/our space. I authorize Island Expeditions to charge my credit card the final balance \$ (minus the						
deposit taken) 90 days prior to my trip start date. I also authorize Island Expeditions to charge my card for incidentals,						
added to my account after my final balance is due.						
Name (as it appears on the credit card)		(Visa or D MasterCard)				
(Card Number)	(Exp. Date)	CCV				
Signature (of credit card holder)						
Please be aware that some US financial institutions have recently begun charging even though no currency conversion takes place. Please cher	•	3				

COMMENTS / ARRANGEMENT NOTES:

Please tell us how you heard about Island Expeditions Co.	
Have you travelled with Island Expeditions Co. before? \Box Y \Box N	If so, when?
what trip?	



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Once your registration form has been received, we will send a confirmation e-mail that includes links to important pre-trip information, plus links to a medical form and liability waiver document. If you do not receive your trip confirmation e-mail within 2 business days, please contact our office. The medical and liability waiver form needs to be received by our office at least 30 days prior to your trip departure.

TERMS & CONDITIONS

I have read carefully and fully understand the contents of this registration form as well as the conditions listed herein including the cancellation and refund policies. I also understand that I must complete and sign a medical form and release of liability prior to trip departure. I understand that I will receive an invoice with a final balance and due date from Island Expeditions Co. I hereby acknowledge that if my final payment is not received by the due date indicated on my invoice, I authorize Island Expeditions Co. to charge the balance owed to the credit card I have provided above.

CANCELLATIONS AND REFUNDS

If for any reason you need to cancel, be aware that many of our trip costs are incurred well in advance of trip departures and others may have been turned away because the trip has filled. All cancellations must be received by our office in writing and refunds will be issued according to the following schedule

- 90+ days prior to departure, deposit retained
- 60-89 days prior to departure 70% refund
- 30-59 days prior to departure 35% refund
- 0-29 days prior to departure the full amount is retained

In the unlikely event Island Expedition Co. may need to cancel a trip due to insufficient guests, you will receive a full refund for the land portion of the trip. Island Expeditions strongly recommends that you purchase medical & trip cancellation insurance for your protection.

Signature _

Be sure to stay connected with us for helpful information, contests and current news from Belize & the Yucatan!

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www.islandexpeditions.com/belize-vacations-blog