

Swim with the Wild Dolphins, Bimini Bahamas Retreat Aug 3-9, 2019

Adironnda & Company with Marilyn & Joeaux

IMPORTANT: A completed registration form is required for each traveler. Please print and photocopy this form to have a record of your booking and the Terms and Conditions.

Retreat cost: \$3,888.00 Based on a minimum of 10 guests in double room. Single supplement: \$350.00

___ Enclosed is my \$325.00 non-refundable deposit by check to reserve my space for this retreat.

___ **Paying by Credit Card add 4%. Enclosed is my signed Credit Card authorization form.**

Name _____ Date: _____
Mailing Address _____
City _____ State _____ Zip _____
Phone (Home) _____ Cell/Wk _____
Email: _____

Please make check payable to JOURNEYS OF DISCOVERY and mail with your registration to:

Gayle Lawrence

Journeys of Discovery

3293 McMath Dr.

Palm Harbor, FL 34684

Phone: 1-727-785-5563

Email: info@ajourneyofdiscovery.com

PASSPORT: You **MUST** have a valid passport that does not expire less than 6 months from the tour return date.

Name **"EXACTLY"** as it appears on the passport _____

Passport Number # _____ Birthdate: _____

Country and Date of Issue _____ Expiration Date: _____

Tour cost is based on double occupancy. I understand that every effort will be made to match me with a roommate, but if this has not occurred 65 days before departure, I will be responsible to pay the single supplement of \$350.00

___ I would prefer a single room at the single supplement rate of: \$350.00

I have a friend who will be traveling with me and we would like to be roommates. Their name is:

_____ Phone _____ Prefer: 1 Bed ___ 2 beds ___

Airfare – you will be notified when it is time to book your flights: Airfare from your home city to Ft. Lauderdale, FL is not included in the tour price. I understand that I am responsible for additional payment for my airfare. For assistance with flight arrangements contact: Gayle Lawrence Journeys of Discovery.

Booking Your Own Flight: Please make sure that your arrival / departure dates and times coincide with the tour itinerary

Insurance: The purchase of trip-cancellation – emergency medical travel insurance is highly recommended for unforeseen emergencies. If you have Pre-existing conditions, you must purchase your policy within 14 days after deposit for the tour. Contact Gayle Lawrence Journeys of Discovery for assistance with insurance.

I do _____ I do not _____ plan to purchase trip cancellation/ emergency medical travel insurance.

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Medical conditions that may put me at risk: _____

Medications that I am taking: _____

Dietary restrictions: _____

In case of emergency, please contact: _____

Emergency phone contact number: _____

Terms and Conditions:

I understand that some or all payments made may be forfeited, based on “my” cancellation of this program as detailed within "Trip Terms and Conditions" listed below.

Reservations and Payments: Your “non-refundable deposit of \$325.00.00”, along with a completed registration form must be submitted to reserve your space. Final payment is due by June 3, 2019.

NOTE: If you register after June 3, 2019 the full trip price is required immediately in order to confirm your space.

The advertised cost is based on a minimum group of 10 guests. Should the final number of passenger’s be less than 10, the trip can still be operated, but there may be a slight surcharge, \$75 - \$150, depending on the final number of the group. You will be notified 65 days before departure if there is to be a surcharge enacted. Payment is due upon notification. Should the trip fail to achieve minimum participation, we reserve the right to cancel the trip and refund in full any deposits received.

Cancellations and Refunds: Cancellations must be received in writing. Please note: Your deposit of \$325.00 is non-refundable should you cancel your space. Cancellation after June 3, 2019 final payment due date, all payments are “non-refundable”.

The purchase of trip cancellation / emergency medical insurance is strongly suggested to protect against cancellation fees and additional travel expenses or medical emergencies that may incur. Please review the guidelines of your trip insurance policy.

Not included: Items of a personal nature such as laundry, drinks, telephone calls. Anything not specifically detailed in the final trip itinerary. Cost of accommodations & associated services for overnights in route, caused by weather, flight schedules, and other unforeseen events are your responsibility.

Trip preparation information and full details will be provided no later than 2 weeks before departure.

Responsibilities: Journeys of Discovery / Gayle Lawrence / Adirondka & Company act only as the group organizer for the passenger with respect to services provided by others including but not limited to, guides, hotels, restaurants, sightseeing and transportation including railroad, aircraft, boat, motor coach, automobile or others. Journeys of Discovery / Gayle Lawrence / Adirondka & Company cannot be held responsible for any injury, loss, damage, delay or inconvenience arising out of or in connection with any defect in any vehicle or any act of God, dangerous incidents, breakdowns, fires, acts of governments, assaults, civil disturbances, strikes, riots, thefts, epidemic, quarantines, delays, sickness, omission, neglect, accident, error or default of any company or person involved in providing services for this tour. You understand that possible alterations to the tour itinerary could become advisable or necessary for the comfort and well being of the passengers and you are in agreement with this. The tour operator and its agents reserve the right to refuse to accept or retain any person as a member of the tour. This right is reserved to withdraw any or all portions of the tour thereof and no refunds are guaranteed. Baggage and all fragile / perishable articles are owner’s responsibility. The acceptance of any service provided, ticket or voucher shall be deemed to be acceptance of and consent by the tour member to these conditions. All services are subject to the law of the country in which these services are provided. It is also agreed and understood that the Captain has the final word and authority onboard the boat at all times and will endeavor to adhere to the proposed itinerary and services as best he can. But should he deem it necessary, due to the uncertainty of weather, mechanical difficulties, and or problems arising from governmental regulations, he has the right to alter itineraries or cancel services of any water activities without refund if he deems this necessary for your safety.

Signature: _____ Date: _____

Credit Card Authorization Form Below.

Please complete, sign and return with registration form if paying by credit card.

Carlson Maritime Travel Agency
Credit Card Authorization Form
Bimini Wild Dolphin Swim Trip Aug 3-9, 2019

NAME AS APPEARS ON CARD: _____

BILLING ADDRESS: _____

CREDIT CARD NUMBER: _____ **Exp** _____

SECURITY CODE: _____

I HEREBY AUTHORIZE: Carlson Maritime Travel Agency to charge:

Bimini Dolphin Retreat Deposit: \$338.00

Bimini Dolphin Retreat Final Payment amount when due: \$3,705.00

Signature _____ **Date:** _____

Title _____