

TRAVEL REGISTRATION

April 1-5, 2024

5 Days - 4 Nights

Tour #2069528

Departing from:	Gainesville	Lake City	Jacksonville
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Passenger Names:

Today's Date: _____

Name: _____

Sex: ☒ Male ☐ Female

Preferred Name (Nametag): _____

Mailing Address: _____ Telephone: _____

City: _____ State: _____ Zip Code: _____ Cell Phone: _____

Email Address: _____ Roommate: _____

Emergency Contact: _____ Telephone: _____

Relationship: _____ Alternate Phone: _____

Name: _____

Sex: Male Female

Preferred Name (Nametag): _____

Mailing Address: _____ Telephone: _____

City: _____ State: _____ Zip Code: _____ Cell Phone: _____

Email Address: _____ Roommate: _____

Emergency Contact: _____ Telephone: _____

Relationship: _____ Alternate Phone: _____

ONLINE SIGNUP is available at: www.TravelConfident.com Or Call: 1-855-376-2037

You are eligible for a PRE-EXISTING CONDITION WAIVER if you purchase the travel protection plan within 14 days of your initial payment.

\$179.00 Additional for Single Occupancy (\$1,018.00 Single)

Number of Passengers _____ @ \$_____ \$_____

DEPOSIT AMOUNT \$ _____

Check #

AMOUNT ENCLOSED \$ _____

Mail to: Senior Adult Travel Inc. PO Box 142045 Gainesville FL, 32614

For additional information contact: Jerry Nash 352-727-2268 jerry@senioradulttravel.com

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