



## 2020 Private Tour Confirmation & Registration

Greetings! This form will confirm your registration on a private tour with Paradise Birding.

DATE(S): \_\_\_\_\_

*Please complete this survey and return it to the address below, along with your deposit—either \$100 for a single day or the single day fee for multi-day tours. Your balance is due 60 days prior to the tour, unless otherwise arranged. For your convenience, we happily accept credit cards, manually or electronically. You may also complete this form online from our tour registration page.*

Full Name: \_\_\_\_\_ Nickname (if any): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Sex: \_\_\_\_\_ Birth date: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Vehicle Preference (circle one): Paradise Birding or Client Vehicle \*

\* If client vehicle, please list type of vehicle and capacity: \_\_\_\_\_

Guide Preference (if any): \_\_\_\_\_

Total Number and Names of all Party Members (*Note that each party member must complete a waiver*):

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Please tell us how you first heard about our private tours: \_\_\_\_\_

**Medical Information\*\*** *Please alert us to any medical or physical conditions that may affect your or your group's activities on an outdoor tour in remote locations. Include any history of heart trouble, asthma, diabetes, or epilepsy, as well as any environmental and medication allergies. Please also include current prescription medications being taken. Use the back of this page or another sheet if necessary. NOTE: Anyone with an existing or potentially serious medical condition should consult a physician before participating in any travel adventure.*

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**Emergency Contact\*\*** *Please include detailed contact information for the person or persons we should contact in case of emergency.*

Name(s) and relationship(s) to you: \_\_\_\_\_

Contact number(s): \_\_\_\_\_

**\*\*NOTE:** If pertinent medical information and/or emergency contact details are necessary for multiple group members, please include this info on the back of this form or attach a separate sheet. *Thank You!*

**Payment Information:** *If you are registering more than 60 days prior to your tour date, please include a deposit with this registration of either \$100 (one-day tours) or the single-day tour fee (multi-day tours). If you register within 60 days of your tour, the full tour fee is due with this form. Please carefully review our refund policy below.*

*If paying by credit card, include your card information below, or call us with your card number. If paying by electronic transfer service, such as PayPal or Venmo, please indicate this below and direct your payment to [steve@paradisebirding.com](mailto:steve@paradisebirding.com). If paying by check, please send payment via U.S. mail to the address below, preferably by Priority Mail.*

CREDIT CARD #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CCV Code: \_\_\_\_\_ Amount authorized with this payment: \$ \_\_\_\_\_

I prefer to call with my credit card number.       I will submit my payment through PayPal or Venmo.

CHECK ENCLOSED # \_\_\_\_\_ Check Amount \$ \_\_\_\_\_

I am sending my forms electronically and will send my check by U.S. Mail.

**REFUND POLICY:** *If you cancel your registration more than 60 days prior to the tour, your deposit and any additional payments are fully refundable. If you cancel less than 60 days prior to the tour, your deposit is non-refundable. If you cancel less than 30 days before your tour, you forfeit your entire tour fee. If you forfeit your deposit, that amount is transferrable to any Paradise Birding tour at any time in the future. If we cancel your tour for any reason, you will receive a full refund, including your deposit. We always recommend that you purchase travel insurance.*