

APPLICATION FOR THE LYDON-GRIGGS – China including Tibet 2011

Name:_(include nickname if you wish)_____

Full Official Passport name:_____

Mailing Address_____

City:_____ State:_____ Zip:_____

Telephone Daytime:_____ Evening:_____

E-Mail:_____ Print E-Mail address again_____

Place of Birth_____ Date of Birth_____

US Citizenship? Yes____ No ____ If no, what country?_____ Age_____

Passport #:_____ (We will need photocopy of passport.)

Place Passport Issued:_____ Date of Issue_____

Date Passport Expires:_____ (Note: If passport expires before May 15, 2012, you must renew it prior to departure.)

Occupation:_____ Height:_____ Weight:_____

Roommate:_____ Going as a single?_____

Emergency Contact While Out of the Country:

Name_____ Relationship to you_____

Address:_____

City:_____ State:_____ Zip:_____

Telephone:_____ Evening:_____ E-Mail_____

Do you have any significant illness requiring regular care of a physician? (if yes, describe briefly)

A note about medications: We will require that you supply us with a complete list of your medications before departure. We will explain this in pre-trip sessions.

Have you been hospitalized in the last 5 years?

Previous International Travel? Yes _____ No _____ If yes, when, where, with whom?

Previous Group Travel? Traveling with a group requires a certain degree of "surrendering" to the dictates of the group. Have you been involved in group travel before? Yes _____ No _____ If yes, describe the circumstances.

Do you think you'll be able to adjust to being with a group?

Briefly state your reasons for wishing to join the Lydon-Griggs China-Tibet 2011 group.

Pre-Trip Sessions: Are you planning to attend the four required pre-trip sessions?
____ Yes ____ No (If "no," then you will not be accepted in the group unless you live over 150 miles away.)

Independent Air Travel – Are you planning to use air arrangements separate from that of the group? Frequent flyer miles on another airline, etc. Your trip price will be lowered by the amount of the airfare portion – c. \$900. _____ Yes _____ No

Statement of Understanding: I have read the attached materials, including the Questions and Answers and understand the requirements to be part of this group including timely payment of fees, attendance at the pre-trip sessions and willingness to adjust my individual needs to those of the group. I also understand that Sandy Lydon and Pacific Harbor Travel reserve the right to accept or reject any person as a member of this group.

Signed: _____ Date: _____

Return this form, a photocopy of the main page of your passport, and a check for \$1,500 made out to Pacific Harbor Travel to:

Wendy Simon,
Pacific Harbor Travel
519 Seabright Ave.
Santa Cruz, CA 95062