



TRIP RESERVATION FORM

TRAVELERS ARE REQUIRED TO SIGN THE ASSUMPTION OF RISKS & RELEASE OF LIABILITY.
PLEASE MAKE A COPY FOR YOUR RECORDS.

Travelers residing at different addresses should complete separate forms.
For additional travelers, please fill out necessary information on additional forms.

Trip Name _____ Dates _____

Traveler's name (as it appears on passport): _____

Second Traveler's name (as it appears on passport): _____

CONTACT INFORMATION

Mailing Address _____

City _____ State/Province _____ Zip Code _____ Country (if not US) _____

Home Phone _____ Work Phone _____ Fax _____

Email _____

TRAVELER 1 INFORMATION

Age _____ Gender _____ Height _____ Weight _____

Nonsmoker Smoker

Date of Birth _____ Citizenship _____

Passport # _____ Expiration _____

T-Shirt Size (unisex) M L XL XXL

TRAVELER 2 INFORMATION

Age _____ Gender _____ Height _____ Weight _____

Nonsmoker Smoker

Date of Birth _____ Citizenship _____

Passport # _____ Expiration _____

T-Shirt Size (unisex) M L XL XXL

Work Phone _____ Email _____

IN CASE OF EMERGENCY

Contact Name _____ Relationship _____

Home Phone _____ Alternative Phone _____

ACCOMMODATIONS

I will share with _____ Where available we prefer Twin Beds King/Queen Bed

Travelers who occupy single accommodation either by choice or circumstance must pay the single supplement.

I am traveling alone. Please assist in finding me a room and/or tentmate (I agree to pay the single supplement if no roommate is available)

I am traveling alone and prefer single accommodations whenever possible and understand that there is an additional charge.

AIR TRANSPORTATION

Southwind trips DO NOT INCLUDE INTERNATIONAL OR IN-COUNTRY FLIGHTS (unless indicated otherwise in the trip's *Detailed Itinerary*). Upon receipt of your deposit, SWA will provide recommended arrival/departure dates and times as well as options for booking your international flights. Our office can assist with the purchase of all in-country air arrangements to coordinate with your adventure.

HOW DID YOU HEAR ABOUT SWA? _____

Please be specific (e.g. name of referral, publication, internet search engine, website, etc.).

DEPOSIT & PAYMENT INFORMATION

I wish to use my MasterCard Visa American Express Discover Check
to pay the Deposit Balance Air Tickets Traveler's Insurance

Name on Credit Card _____

Credit Card Number _____ Exp date _____

Billing Address (if different than above) _____

Authorized Signature _____

Thank you for your Reservation!

ASSUMPTION OF RISKS and RELEASE OF LIABILITY

Payment of your deposit represents an understanding of and acceptance of the Terms & Conditions outlined on Southwind's Website (www.southwindadventures.com), in the below Release of Liability, and those described on each detailed itinerary. They define SOUTHWIND'S RESPONSIBILITY with respect to all of our programs. PLEASE READ THEM CAREFULLY.

ASSUMPTION OF RISKS

I HEREBY ACKNOWLEDGE that I have voluntarily applied to participate on the tour as designated on the Southwind Adventures (SWA) Trip Reservation Form, and that I have read the description of the trip as it appears on this website or in SWA's printed materials. I am aware that travel to the foreign countries and/or remote areas visited by this trip involves numerous risks and dangers including, but not limited to: the forces of nature; roads, trails, hotels, vehicles, boats or other means of conveyance which are not operated nor maintained to standards common in the United States; civil unrest; terrorism; war; the hazards of traveling through mountainous terrain, at high altitudes, or to undeveloped areas; travel by canoe, boat, bicycle, train, plane, automobile, horseback, or by other means of conveyance, or by foot; accident or illness without access to means of rapid evacuation or availability of medical supplies; the adequacy of medical attention if provided; physical exertion to which I am unaccustomed or for which I am not prepared; consumption of alcoholic beverages; or additional factors known or unknown.

Initials Here _____, _____.

RELEASE OF LIABILITY

I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGERS INVOLVED AND HEREBY AGREE TO BE RESPONSIBLE FOR MY OWN WELFARE AND ASSUME ANY AND ALL RISKS OF DELAY, UNANTICIPATED EVENTS, ILLNESS, INJURY, EMOTIONAL TRAUMA, OR DEATH. As lawful consideration for being permitted to participate on such trip(s), I HEREBY RELEASE AND DISCHARGE SOUTHWIND ADVENTURES, INC. AND ITS EMPLOYEES OR ASSOCIATES FROM ALL ACTIONS, CLAIMS, OR DEMANDS FOR DAMAGES RESULTING FROM MY PARTICIPATION IN THE TRIP(S).

I verify this statement by placing my **initials here**: _____, _____.

I agree that the foregoing obligation shall be binding upon me personally, as well as upon all members of my family including any minors under the age of 21 accompanying me, my heirs, executors, administrators, assigns, and legal representatives; it being my intention to fully assume all the risk of travel and to release SWA from liability to the maximum extent of the law. I understand that all reservations are subject to acceptance by SWA and upon acceptance shall be deemed to have been entered into and to be performed in Arapahoe County, Colorado. In the unlikely event a legal dispute should arise involving any subject matter whatsoever, I agree that the following conditions will apply: a) the dispute shall be settled by binding arbitration through the American Arbitration Association at Denver, Colorado; b) the dispute will be governed by Colorado law; and c) the maximum amount of recovery to which I will be entitled under any and all circumstances will be the land cost of my trip with SWA.

I agree to the use of photographic or film images taken of me and/or my family members on any SWA trip for use by SWA for promotional and/or commercial purposes. I further acknowledge that payment to SWA represents an acceptance of these conditions and those in SWA's Terms & Conditions, in which I have noted SWA's cancellation & refund policies, and agree to all stated conditions set forth there within. I am aware that this is a release of liability and a contract between myself and Southwind Adventures, Inc. and sign it of my own free will. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. I have read carefully this agreement and fully understand its contents.

Trip Name(s) & Dates _____

Each participant must sign their name.

Signature of Participant _____ Date _____

Signature of Participant _____ Date _____

Children's Name(s): (If applicable:) _____
(Both Parents or Legal Guardians must sign for participants under the age of 18)