

Enrollment form

Please ask your Group Leader to affix label here or fill out the following:

Tour # (required for processing enrollment form): _____

Tour name and requested travel date and year: _____

Group Leader: _____

(Group Leaders should not fill out an enrollment form for themselves.)

TRAVELER INFO

Important: If traveling by air, provide your complete name as it appears on your travel credentials (e.g., birth certificate, passport, or state-issued identification).

Legal first name: _____
(No nicknames, i.e. Robert, not Bobby. Important: \$100 minimum penalty for name change.)

Middle name: _____
(Provide only if included on your photo identification. If your photo identification displays a middle initial, list only a middle initial here. Your name must be an exact match.)

Last name: _____

Date of birth: _____ Sex: Male Female Are you a U.S. citizen? Yes No
Optional: For travel to Canada, we will use this to provide you the most accurate information on passport/visa requirements.

Traveler's email: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Home telephone: _____ Prefiero comunicación en español cuando esté disponible.

EMERGENCY CONTACT INFO

Important: Contact should not be traveling on tour (Required for all tour communication and in case of emergency.)

First name: _____ Last name: _____

Sex: Male Female Check one: Parent Legal guardian Relative Spouse Friend

Contact's email: _____
(Email of person not traveling on tour)

Home telephone: _____ Mobile telephone: _____ Prefiero comunicación en español cuando esté disponible.

SECURE YOUR INVESTMENT WITH TRAVEL PROTECTION

(Learn more at efexploreamerica.com/protection)

Enroll in Anytime Protection Plan

Enroll in Travel Protection Plan

Your enrollment form must be signed below by you, and if the applicant is under 18, or a minor under any other applicable law, by your parent/legal guardian.

I (or parent/legal guardian if enrollee is a minor) have completely read, understand, and agree to be bound by the incorporated "EF Booking Conditions", which include a "Release & Agreement". I consent to EF's processing of my personal data as set forth in EF's Privacy Policy at www.efexploreamerica.com/legal/privacy-policy. I confirm that I am an authorized user of the credit/debit card or bank account provided, and I understand that this charge will show up on my statement credited with today's date in the next 2-3 business days.

Signature of enrollee (or parent/legal guardian if enrollee is a minor): _____

Date: _____