



## Tour Registration

Global Culinary Escapades  
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TRAVELER INFORMATION			
First:	Middle:	Last name:	Home phone no.:
Street address:			Cellular no.:
P.O. box:	City:	State:	ZIP Code:
Email Address:		Date of Birth:	
Passport #		Expires:	
Country of Issue:	Emergency Contact:	Emergency Number:	
Payment by: Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Make checks payable to Global Culinary Escapades  Name on the credit card: _____ Address (if different): _____ _____ _____		Type of credit card: (all except Discover) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> American  Credit Card #: _____  Expiration: _____ CVN: _____	
<b>TOUR INFORMATION:</b> Bordeaux & Dordogne Valley Fall 2019 Monday, September 16 – Tuesday, September 24, 2019 \$2,950 per person \$450 single supplement Deposit: \$450 Registration form can be faxed, emailed or mailed to address above.		<b>Deposit Refund Policy and Payment Schedule</b> All cancellations within 48 hours of deposit are subject to a \$100 administrative fee. After 48 hours, any cancellation will result in the loss of deposit. Statements will be sent out prior to the final payment due date of Monday, June 17, 2019.	

The undersigned individuals wish to receive a guided tour of GCE. In exchange for this tour, the undersigned individuals agree to waive and release any and all claims arising from or in any way connected to the tour:

1. Voluntary Participation. I understand and confirm that my participation in the Tour is voluntary. I am in good health and suffer from no physical or mental condition that would make me especially susceptible to injury or disability while participating in the Tours.
2. Comprehension of Risk. I fully comprehend and accept all of the risks associated with my participation in the Tours including, without limitation, injury or death resulting from exposure to unfavorable weather conditions, food sickness, allergic reactions, choking, and injuries arising from self-inflicted accidents or mishaps, other participants, motor vehicles, and pedestrians. I understand that the Tours take place in public venues under conditions largely beyond Company's control.
3. Release, waive, discharge and covenant not to sue Global Culinary Escapades, plus any affiliated entities or subsidiaries, current and former employees, officers, members, owners, managers, contractors, partners, directors, from any and all LIABILITY to the participant and the

undersigned, his or her heirs and next of kin of any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

4. Consent for medical treatment: I understand and acknowledge that traveling to a foreign country and engaging in touring activities while en route or while in a foreign country involves, or may involve, hazards and dangers, and could result in physical injury, or even death, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor or Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent or myself.
5. I agree that GCE is not liable for delay or cancellation resulting from acts of participants, agents, employees, acts of God, public enemy, or the United States; or fire, natural disaster, strikes, or civil disturbance.
6. Being on a tour with other people is not a private activity, therefore you acknowledge to grant to GCE an irrevocable, sub-licensable, non-exclusive, perpetual, royalty-free right to use my name, photographic, video and digital likeness as well as any content submitted via website(s) or electronic mail, solely for our promotional and/or commercial purposes without further obligation or compensation.
7. GCE acts only as an agent for the various independent suppliers that provide hotel accommodations, transportation, sightseeing, activities, or other services connected with this tour. Such services are subject to the terms and conditions of those suppliers. GCE and their respective employees, agents, representatives, and assigns accept no liability whatsoever for any injury, damage, loss, accident, delay, or any other incident which may be caused by the negligence, defect, default of any company or person in performing these services. Responsibility is not accepted for losses, injury, damages or expenses of any kind due to sickness, weather, strikes, hostilities, wars, terrorist acts, acts of nature, local laws or other such causes. All services and accommodations are subject to the laws and regulations of the country in which they are provided. GCE is not responsible for any baggage or personal effects of any individual participating in the tours / trips arranged by GCE. Individual travelers are responsible for purchasing a travel insurance policy, if desired, that will cover some of the expenses associated with the loss of luggage or personal effects.

Having read carefully this information concerning the program, I hereby submit this waiver and agree to comply with the guidelines and regulations of this program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Hotel:**

Type of room needed:  Double room (one bed for two people)  Twin room (two beds for two people)  
 Single room (one bed for one person). Single supplement: \$ 450

Name of travelling partner: \_\_\_\_\_

**ADDITIONAL SERVICES NEEDED**

**Hotel:**

City \_\_\_\_\_ Dates \_\_\_\_\_ Number of Nights \_\_\_\_\_

City \_\_\_\_\_ Dates \_\_\_\_\_ Number of Nights \_\_\_\_\_

Reward Programs: \_\_\_\_\_

Comments: \_\_\_\_\_

**Air:**

Preferred class:  First  Business  Economy Refundable/non-refundable Seating:  Isle  Window

Special meals: \_\_\_\_\_

Comments: \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_  AM  PM

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_  AM  PM

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_  AM  PM

Reward Programs: \_\_\_\_\_

**Train:**

Preferred class:  First  Economy Refundable/non-refundable Seating:  Isle  Window

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_  AM  PM

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_  AM  PM

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_  AM  PM

**Insurance: Travel insurance is highly recommended for financial and other losses arising from cancellation or delay of travel and other risks associated with travel. Please visit our page <http://www.globalculinaryescapades.com/why-buy-insurance/>**