



Registration Card

2333 Camino Del Rio South Ste.240 • San Diego CA 92108 •

Tel. 619-443 2001 • Fax 619 561 4095

Mail To: Discovery Tours & Travel @ P.O. Box 1830 Lakeside Ca. 92040

School/Group Name : Dingeman Sacramento Day Tour		School Name:
Dates: Friday, May 28, 2010		Student or Adult (circle one)
Last Name:	First Name:	M or F (circle one)
Billing Address:		
Parent or students name if different :		
City:	State:	Zip Code:
Parent/Guardian:	Home Phone:	Work:
Other Parent/Guardian:	Home Phone:	Work:
Cell Phone (of parent/guardian):		e-mail address:
<p>If you would like to take Travel Insurance out on your student, the information included with packet is CSA Travel Protection. You must fill out the insurance form and send it back directly with your insurance payment to CSA Travel Protection Plan. Call CSA at 1 800 348 9505 to sign-up and for more information on benefits. Discovery highly recommends using some kind of travel Insurance <i>if no insurance is needed</i>. "No, I do not want to purchase the insurance with CSA. I understand that my decision is final and I may lose up to 100% of the total tour price if I cancel".</p> <p>Parent: I have read and agree to the policies and conditions stated on the Registration Information sheet and on this card. Parent Signature: _____</p> <p>Student: I understand that my participation is contingent upon my meeting the requirements established by the school or the group leaders in consultation with the School district. Student Signature: _____</p>		

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Important Information and Conditions (see reverse side for payment information)

Contact [Tammy](#) for the Terms and Conditions (not shown on internet copy)