



TRAVEL DATES _____

BUDGET _____

IS THIS TRIP FOCUSED ON:

**CHECK ALL THAT APPLY*

☐ RELAXATION ☐ CULTURE ☐ ADVENTURE

HOW ARE YOU PLANNING ON TRAVELING? ☐ CAR ☐ PLANE

WHERE ARE YOU LOOKING TO TRAVEL?

☐ INTERNATIONAL ☐ USA ONLY ☐ OPEN TO EITHER

DO YOU HAVE A VALID PASSPORT? ☐ YES ☐ NO

**IF PLANNING INTERNATIONAL TRAVEL, PLEASE SEND A COPY OF YOUR PASSPORT WITH THIS FORM*

CHECK THE ACTIVITIES THAT SOUND INTERESTING/ENJOYABLE FOR THIS TRIP:

☐ GREAT RESTAURANTS

☐ FINE DINING

☐ SIGHT SEEING

☐ DIVE BARS

☐ NIGHTCLUBS

☐ COFFEE SHOPS/CAFES

☐ CRAFT BEER

☐ WINE

☐ LIVE MUSIC

☐ MUSEUMS

☐ ZOO/AQUARIUM

☐ SPORTING EVENTS (NFL, SOCCER)

☐ PLAYS

☐ SPA

☐ HIKING/BIKING

☐ KAYAK/PADDLE BOARD

☐ SAILING/BOATING

☐ OTHER: _____

PLEASE LIST THE CITIES/STATES/COUNTRIES YOU HAVE PREVIOUSLY VISITED

PLEASE NOTE: THE FOLLOWING PERSONAL INFORMATION IS COLLECTED AS MANY ACTIVITIES, EXCURSIONS, AIRLINES, ETC REQUIRE THIS INFORMATION.

TRAVELER NAME	DOB/AGE	HEIGHT	WEIGHT	PASSPORT NUMBER & KNOWN TRAVELER NO.
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ARE ALL MEMBERS OF YOUR PARTY VACCINATED & BOOSTED AGAINST COVID-19?

☐ YES, VACCINATED & BOOSTED
☐ MIXED: SOME ARE, SOME ARE NOT

☐ VACCINATED, NOT BOOSTED
☐ NO, NOT VACCINATED

CURRENT ADDRESS -----

PHONE NUMBER(S) -----

EMAIL ADDRESS -----

PREFERRED METHOD OF CONTACT (LABEL 1,2,3 ORDER OF PREFERENCE)

☐ CALL ☐ TEXT ☐ EMAIL

HAVE YOU OR ANYONE TRAVELING HAD ANY SURGERIES? PLEASE LIST BELOW.
THIS IS ALSO THE SPACE TO INFORM ME OF ANY MEDICAL NEEDS OR
LIMITATIONS. -----

THIS AREA OF THE QUESTIONNAIRE IS FOR ME TO GET TO KNOW YOU & YOUR FAMILY A LITTLE BETTER. BE DETAILED HERE! THE MORE I KNOW ABOUT YOU, THE MORE PERSONALIZED YOUR TRIP WILL BE!

RATE EACH INTEREST OR HOBBY ON A SCALE OF 1-5, WITH 1 BEING NO INTEREST AND 5 BEING VERY INTERESTED.

_____ YOGA	_____ READING
_____ HORSEBACK RIDING	_____ ANIMALS
_____ DRINKING WINE/BEER/LIQUOR	_____ SPORTS
_____ PSYCHICS/TAROT READERS	_____ BEACH
_____ ARCHITECTURE	_____ SKIING/SNOWBOARDING
_____ HISTORY	_____ HIKING
_____ ART	_____ GOLF
_____ BOATS	_____ TENNIS

HOW ADVENTUROUS ARE YOU/YOUR FAMILY WITH FOOD? IS ANYONE A PICKY EATER? ANYONE WITH DIETARY NEEDS/ALLERGIES? IF THERE ARE SPECIFIC CUISINES ANYONE LOVES/HATES, PLEASE LET ME KNOW HERE! _____

PLEASE USE THIS SPACE TO COMMENT ON THE RATINGS YOU GAVE ABOVE & TELL ME ANYTHING ELSE ABOUT THOSE TRAVELING _____

