

**TOUR NAME:** Lion King (The Award-Winning Best Musical)

**DIAMOND DESTINATIONS**



Travel & More

Tour Date: From: January 28th, 2019 To: January 30th, 2019

**Participants going on Tour:**

1). Legal Name: \_\_\_\_\_ Male Female

Nickname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

2). Legal Name: \_\_\_\_\_ Male Female

Nickname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # to Reach You: \_\_\_\_\_

**ROOM TYPE:**                      Single      Double      Triple

Roommate(s) \_\_\_\_\_

Misc: \_\_\_\_\_

(Handicap      Smoking      Non-Smoking)

**GATEWAY:** \_\_\_\_\_

Is Special Assistance required at airport?

**YES or NO**

**Note:** All handicapped rooms are by request only. All seating needs are at the airlines discretion. Diamond Destinations has no control over accommodations provided by third party and no liability for the failure of a third party to provide such accommodations. There may be added expense involved if special requests for flight arrangements are made.

As a participant in our travel club, you agree that you are able to get on and off of all forms of transportation. Please be aware that on some tours you may be required to walk long distances and in some cases encounter cobblestones, uneven surfaces, step climbing, and or standing for long periods of time. The escorts on this tour will not be able to provide special assistance to travelers. If you are a person that requires special assistance, please make arrangements to be accompanied by a person capable of providing that assistance.

Please ATTACH a copy of your photo ID for Flights, Cruises. and International Tours:

If Traveling out of the USA, attach a copy of your passport.

**NOTE:** Please note you must be willing and able to travel alone from your departing city if necessary to final tour destination.

You may use my travel photos for promotional purposes. **YES - NO**

Inclusion of Travel Insurance varies by trip. Review flyer for details. Initial box below to indicate your choice. \_\_\_\_\_

I wish to purchase trip insurance at this time.

I DO NOT wish to purchase trip insurance at this time.

**PAID BY:** \_\_\_\_\_

**AMOUNT:** \_\_\_\_\_

**Signature of Traveler:** \_\_\_\_\_

**Date:** \_\_\_\_\_