DIAMOND DESTINATIONS Rio Palace Pacifico - Nuevo Vallarta, Mexico TOUR NAME:_ Tour Date: From: February 2nd, 2020 To: February 9th, 2020 Participants going on Tour: (Please include picture of Passport picture page.) Exactly as it appears on your Passport Male Female 1). Legal Name: __ Nickname: Date of Birth: 2). Legal Name: Male Female Nickname: _____ Date of Birth: ____ Home Address: City: _____ State: ____ Zip: ____ Phone # to Reach You: **ROOM TYPE:** GATEWAY: Double Triple Single Roommate(s) Is Special Assistance required at airport? Misc: YES or NO (Handicap Smoking Non-Smoking) **Note:** All handicapped rooms are by request only. As a participant in our travel club, you agree that you are able to All seating needs are at the airlines discretion. get on and off of all forms of transportation. Pleace be aware Diamond Destinations has no control over accomthat on some tours you may be required to walk long distances modations provided by third party and no liability and in some cases encounter cobblestones, uneven surfaces, for the failure of a third party to provide such step climbing, and or standing for long periods of time. accommodations. The escorts on this tour will not be able to provide special There may be added expense involved if special assistance to travelers. If you are a person that requires special requests for flight arrangements are made. assistance, please make arrangements to be accompanied by a person capable of providing that assistance. Inclusion of Travel Insurance varies by trip. Review Please ATTACH a copy of your photo ID for Flights, Cruises. and flyer for details. Inital box below to indicate your **International Tours:** choice. If Traveling out of the USA, attach a copy of your passport. I wish to purchase trip **NOTE:** Please note you must be willing and able to travel alone insurance at this time. from your departing city if necessary to final tour destination. You may use my travel photos for promotional purposes. YES - NO I DO NOT wish to purchase trip insurance at this time. Travelers paying with credit cards MUST PAID BY: _____ add 3.5% credit card processing fee. AMOUNT: ____

Date:

Signature of Traveler: ______