

### Student Information

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Male \_\_\_ Female \_\_\_

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

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

Student's Home Phone: ( ) \_\_\_\_\_ Student's Cell : ( ) \_\_\_\_\_

Email: \_\_\_\_\_

High School \_\_\_\_\_ GPA \_\_\_\_\_ Grade (entering this fall) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Email \_\_\_\_\_

Fathers's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Email \_\_\_\_\_

Roommate/Friends Name (optional) \_\_\_\_\_

### Emergency Information (if different from above)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

I have read the Grand College Tours rules and regulations and the Grand College Tours Terms and Conditions. I will complete the Medical Release Form prior to departure.

Parent/Guardian Permission: As a legal guardian I give permission for the registrant to participate in all phases of Grand College Tours activities and off-site trips. I hereby assume all risks or loss and injury that may be incurred, directly or indirectly, as a result of such participation. I understand and agree to cooperate with all regulations. I have read the Grand College Tours Rules and Regulations and Terms and Conditions. I will not allow registrant to attend if not in good physical condition. In an emergency, when the undersigned or other person named cannot be reached, I give permission for the camp authorities to take any emergency measures deemed appropriate. It is understood that all reasonable efforts will be made to contact the parent/guardian. I understand that when participating in Grand College Tours activities the registrant may be photographed for print, video or electronic imaging. I understand that the images may be used in promotional materials, news releases and other published formats, and will be the sole property of Grand Edventures, Inc. its assigns or successors.

Grand Edventures, Inc. reserves the right to reschedule or cancel a tour with fewer than 20 travelers. If an insufficient number of travelers register for your tour, we will offer you a choice: pay a Small-Group Supplement Fee to allow the tour to operate; choose another tour and/or departure date with a sufficient number of travelers; or cancel your tour without penalty. This application will be approved when Grand Edventures deems it accepted. Deposit is non-refundable, final payments are due within 30 days of departure.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**June 11, 2012 - June 15, 2012**

**\$1199 Per Student + \$99 Grand Travel Ease (Gratuities, Taxes, Medical/Cancellation Protection)**

Includes Charter Round-trip bus from Coral Springs or Boca Raton, Florida, double hotel accommodations, 3 meals daily, campus visits/tours, sightseeing and evening activities. Single accommodations available at an additional rate of \$250.00.

**Deposit of \$200.00 is required. Checks Payable to GRAND EDVENTURES**

Mail to: Grand Edventures, Inc. P.O. Box 970694, Boca Raton, FL 33497  
(954) 354-1080 or Toll Free 1 (877) 354-1080

\_\_\_ VISA \_\_\_ MC \_\_\_ AMEX \_\_\_ DISCOVER \_\_\_ CHECK ENCLOSED

Credit Card No. \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code: \_\_\_\_\_

