

Adoption Associates, Inc.

2018 Orphanage Volunteer Trip To China

Registration Form

June 22, 2018 – July 1, 2018

Tour name: _____ Tour Date: _____

Travelers

Last Name:	First Name	Preferred Name
Last Name:	First Name	Preferred Name
Last Name (child):	First Name	Date of birth:
Last Name (child):	First Name	Date of birth:

Contact information

Address	City	State	Zip
Phone (H)	(Mom's W)	(Dad's W)	
Phone (Mom's Cell)	(Dad's Cell)	Fax:	

Best time to reach you: _____ Best phone number to call: _____

E-mail (Mom) _____ E-mail (Dad) _____

Please reserve space for adults _____; child _____; total of _____ or [] single occupancy at an additional cost

Room/Bed preference: [] one bed [] two beds

Special anniversaries, birthdays or other occasions for celebration during this program: _____

Do you plan to visit orphanage after the main tour? No _____ Yes: _____

If yes, Please email to Ming at adoptioninchina@gmail.com for orphanage visit quote.

Family Medical Information: In the event of an emergency we will contact your provider to secure approval for medical treatment.

Insurance Provider:	Policy/Group Number:	Telephone Number:
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Physician(s) for Emergency Contact: _____

Prescriptions: Please attach a list of all prescription medications taken by all family members and their purpose. This list is for emergency use only and will be kept strictly confidential.

Allergies: Please attach a list of all allergies for all family members, including asthma, hay fever, medications, foods, insects, etc.

Emergency Information Please name two individuals NOT traveling with you who will assume responsibility for you in case of an emergency.

Name (1): _____ Relationship: _____

Address: _____

Telephone: Home/Cell: _____ Office: _____

Name (2): _____ Relationship: _____

Address: _____

Telephone: Home/Cell: _____ Office: _____

TERMS & CONDITIONS

Reservation and Payments: A non-refundable \$200 per person deposit is required by November 15, 2017 to secure your reservation. Second payment of \$500 per person is due January 30, 2018. Final payment will be due on or before April 30, 2018. Tour cost is based on current exchange rate and subject to change due to foreign currency fluctuation. Payments may be made with credit card or check payable to Adoption Associates, Inc.

Travel, Passport and Visa: A valid passport for at least six months after the date of return is required. Visit <http://www.china-embassy.org/eng/visas/hrsq/> for information regarding obtaining your Visa. Chinese Cultural Exchange coordinates travel within mainland China (not including Hong Kong). All international travel arrangements (including air travel from traveler’s departing airport, to China, and returning to traveler’s arriving airport) as well as obtaining of a current Chinese Visa are the responsibility of the traveler and/or your chosen travel agency or courier service. Obtaining travel insurance is strongly advised and is the responsibility of each traveler.

Medical Responsibilities: Medical or other unexpected expenses during the trip are the responsibility of the participant. We advise participants to obtain medical and travel insurance for all travelers in your party. Use of a Chinese medical facility requires prepayment prior to the physician seeing/treating the patient, even in an emergency situation. A heritage tour to China can be physically, mentally, and emotionally demanding. Stressful situations could affect adults, children and all other travelers, especially seniors, minor children and/or those with disabilities or requiring special medical attention/services. We suggest that you consult your physician prior to the tour and obtain any necessary advice, immunizations and/or medications. AAI is not responsible for any illness that you, your children, or other travelers in your party may contract while in China or traveling to and from.

Cancellation and Refund Policy: Adoption Associates, Inc. (AAI) must strictly adhere to its cancellation policy to offset costs incurred prior to the commencement of the tour, which may include, but are not limited to: advance payments to land operators, communication expenses, development/promotional expenses, and the loss of time that might have permitted resale of reserved space. Cancellation for all or any part of the trip will not be effective until such is received in writing in the office of AAI. Should you cancel your trip for any reason before April 30, 2018, payment will be refunded, minus the non-refundable deposit of \$200 per person, No refunds will be given for cancellation after April 30, 2018. AAI has the right to cancel the trip if a minimum number of attendees are not confirmed by April 30, 2018. If such occurs, all payments with the exception of the \$200 per person non- refundable deposit will be refunded in full.

Basis of Rates: All prices are based on two persons sharing a room. All prices and fares are quoted in U.S. dollars. The rates are based on current tariffs and are subject to change due to unforeseen circumstances. While we will do everything possible to maintain the listed prices, if it is necessary to levy a surcharge, we reserve the right to do so, and notification will be given at the time of final invoicing.

Photography: Adoption Associates, Inc. and our partner organizations reserve the right to take photographs or videos during the operation of any tour or part thereof and to use the resulting photography for Adoption Associates, Inc. promotional purposes. By making a reservation with Adoption Associates, Inc., participants agree to allow their images to be used in such photography.

Liabilities Clause: Adoption Associates, Inc. and the sponsoring organization act only as an agent for the passenger with respect to travel services. We assume no responsibility or liability in whole or in part for any injury, damage, loss, delays, delayed or changed departure or arrival, missed carrier connection, weather, strikes, acts of God, circumstances beyond our control, war, quarantine, criminal activity, expense, accident, sickness, injury or death to person or property, or mechanical defect, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation or other services or for any substitutions of hotels, or of common carrier equipment beyond our control, with or without notice, or for any additional expenses occasioned thereby. AAI assumes no responsibility or liability due to an act, negligence or default of the tour guide, or any company or person engaged in transporting the passengers, or rendering any service, or carrying out the arrangements for any tour, or their agents and employees. If due to weather, flight schedules or other uncontrollable factors you are required to spend an additional night, you will be responsible for your own hotel, transfers and meal costs. No refund will be made for any unused portion of the tour due to these causes or voluntary cancellations. Baggage and personal effects are the sole responsibility of the participant at all times. The right is reserved to decline to accept or retain any person as a member of these tours at any time. AAI reserves the right to change the itinerary of the tour without prior notice. AAI shall not be liable for any loss whatsoever to passengers by reason of such cancellation, substitution or changes. If the tour is cancelled by AAI for any reason, AAI shall have no liability beyond the refund of all tour participants’ deposits received by it. AAI may increase the tour price in the event of cost increases. The airline tickets when issued shall constitute the sole contract between the air company concerned and the purchaser of these tours and/or passenger. The carriers are not responsible for any act, omission, or event during the time tour participants are not aboard their conveyance. By registering for this tour, tour participant certifies that he or she is mentally and physically capable of full participation in this tour. Upon payment of a deposit, tour participant indicates acceptance of the above terms and conditions.

Enclosed is my check payable to Adoption Associates, Inc. in the amount of \$_____ (\$200 per person x _____ total people)

PLEASE ENCLOSE A COPY OF YOUR PASSPORT FOR EACH PERSON.

I/We have read and agree to all policies, payment schedules, and terms and conditions. I/We agree to pay full payment by check Or credit card by April 30, 2018.

Signature: _____ Date: _____

Signature: _____ Date: _____

Adoption Associates, Inc.

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For information please email: Kris Dickens - kdickens@adoptionassociates.net