



# Knights Travel

Knights Travel  
Attention: Martha O'Bryan  
2525 Bardstown Rd,  
Louisville, KY 40205

## TOUR REGISTRATION FORM

Tour Dates: \_\_\_\_\_ Tour Title: \_\_\_\_\_

FULL NAME (Mr./Mrs./Ms./ Dr.) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TOWN/CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: HOME ( \_\_\_\_\_ ) \_\_\_\_\_

CELL: ( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PERSONAL DETAILS: AGE: \_\_\_\_\_ SEX: \_\_\_\_\_

PHYSICAL LIMITATIONS: \_\_\_\_\_

PLEASE LIST NAME(S) & TELEPHONE NUMBERS OF PERSON(S) TO CONTACT  
IN CASE OF EMERGENCY: \_\_\_\_\_  
\_\_\_\_\_

CHECK ONE OPTION:  - I desire to have single accommodations (without a roommate),  
and pay the single accommodations supplement.

- I will share accommodations with \_\_\_\_\_

- I require someone to share accommodations \_\_\_\_\_ Smoker  
\_\_\_\_\_ Non-Smoker

NOTE: I have read the Conditions & Responsibilities paragraph on page two of this  
Tour registration form, and agree to its terms & conditions.

Please call Martha O'Bryan if you have any questions 502-426-5394.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## Conditions & Responsibility

This tour is operated by Diamond Tours, Inc., 13100 Westlinks Terrance, Suite 1, Fort Myers, FL 33913. Knights Travel acts merely as agent for the client in acquiring airfare, cruise itinerary, transportation, hotel, accommodations, sightseeing, and other privileges, or services as described. I have read the forgoing and agree to be bound by the terms and conditions thereof. I have read the cancellation/revision policy and agree to the terms provided.

Therefore, Knights Travel shall not be responsible for any loss, accident, injury, delay, defect, omission, or irregularity which may occur or be occasioned, whether by reason of any act, negligence, or default of any company or person engaged in or responsible for carrying out any of the arrangements, or otherwise in connection therewith. By forwarding of deposit, or any payments, the participant certifies that he/she does not have any disability that would create a hazard for him/herself or other participants and accepts the terms contained in this Release of Liability, Assumption of Risk and Binding Arbitration Agreement.

### Payment Terms:

Deposit of \$75 USD per person is due at the time of registration. The balance of the tour cost is \$\_\_\_\_\_

Due \_\_\_\_\_.

### Cancellations/Refunds:

Cancellations must be submitted in writing. Reimbursements for all individual cancellations will be made and honored up to two weeks prior to departure (provided the total remains at 40 paid participants).

Therefore, obtaining trip cancellation insurance is recommended! Trip insurance must be purchased **within 14 days of deposit to cover pre-existing conditions**. Travel Confident Protection Plan purchasing update. Travel Confident Protection Plan can no longer be purchased by check. The Travel Confident Protection Plan is on a separate flyer. EASY ONLINE SIGNUP to purchase the Travel Confident Protection Plan at:

[www.TravelConfident.com](http://www.TravelConfident.com)

Mail completed registration form and check written out to **KNIGHTS TRAVEL** to:

**Knights Travel**  
**Attention: Martha O'Bryan**  
**2525 Bardstown Road**  
**Louisville, KY 40205**

*Please call Martha O'Bryan, if you have any questions 502-426-5394.*