**TRIP PARTICIPANT REGISTRATION**

**Yellowbilled Tours (YBT) France the Mediterranean Coast and Maritime Alps 2018 Birding Field Trips**

**May1th to May 7th.**

**6 persons maximum each field trip**

**The cost of the field trip is $2950.00 per person base fee for six attendees and $3250.00 for four attendees. The fee covers France train fees to Arles and return to Paris, lodging plus breakfast, transportation, fuel, park fees and guide fees. Airfare and meals are not included.**

**A $1600.00 deposit per person is required upon registration.**

**A $250.00 administration fee will be charged if you cancel within 60 days after you register. The balance is due March 5, 2018.**

**If a participant cancels within 60 days of the start of the trip every effort will be made to find a suitable replacement. During the replacement search for a replacement, a $500.00 per week will be taken against your trip fee. If you cancel, I will encourage you to help me find your replacement. If a replacement cannot be found your deposit can be used over the next 18 months toward another YBT field trip. Last-minute trip cancellation by tour leader would occur only in the event of an extreme emergency. In this case, your refund will be 100%.**

Richard Cimino Phone 925-353-0266

60 Elizabeth Circle

Larkspur, Ca. 94904 [yellowbilledtours@gmail.com](file:///C:\Users\R.Cimino\AppData\Local\Temp\yellowbilledtours@gmail.com)

**DATE OF TRIP**: May 6th, 2018 - (Arrival in Paris afternoon of May6, 2018)**\_\_\_\_**

1. Full name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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2. Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State and ZIP:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Alternate phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. E-mail address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: \_\_\_\_\_\_\_\_

6. Describe your general physical condition. Prescriptions you may be taking daily?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Do you have hearing difficulties, do you use a hearing aid? Yes\_\_\_\_\_ No\_\_\_\_\_\_\_\_

8. Do you have trouble with stepping up into a four wheel vehicle? Yes \_\_\_\_\_ No

9. Emergency contact information:

Name & relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_