

# Search Beyond Adventures, Inc.

## Program Application

Office Use Only

FM		
PI		
TD		

**APPLICANT'S LEGAL NAME:** \_\_\_\_\_  
(airline or cruise documents will be in this name and must match your ID)

**PREFERRED NAME (if different):** \_\_\_\_\_

**TOUR NAME:** \_\_\_\_\_

### PHOTO

Please attach a photo we can use to identify you when meeting you, or to give to authorities in case of emergency.

### TOUR INFORMATION

TOUR DATES \_\_\_\_\_ TRIP # \_\_\_\_\_ YOUR DEPARTING CITY\* \_\_\_\_\_

\* Indicate nearest airport or airport preference if flying; nearest train station if train tour--we will ticket. If you are being picked up by our vehicles, suggest which city to meet en route--we will contact you for exact meeting place and time.

FLIGHT ASSISTANCE NEEDED (if an air tour): Check one only! Visit [www.searchbeyond.com](http://www.searchbeyond.com) or call for examples of these services.

- Airline *Meet and Assist* service (no fee) The airline assists with any necessary en route plane transfer. Available for all travel.
- Airport *Travelers' Assistance* service. Available only in MSP airport between 8 am and 8 pm. If you have a connecting flight an airport assist program will meet your flight and wait with you for any connecting flight. Not used for direct flights or flights originating from MSP. MSP Airport Assistance charges a fee of approximately \$40 each way (\$80 if roundtrip used). We will pay this directly and bill you for their charge.
- Needs staff to assist with any connecting flight (possible additional airfare to re-route our staff via your connecting city). Our staff will meet you in a connecting city and assist with any transfers. A tour staff will fly into the connecting city, meet you there, and fly the next segment with you. If we can book you a non-stop or direct flight instead this option won't apply.
- Direct flight necessary (may result in a price surcharge). May not be available from/to all cities, especially smaller airports.
- Needs staff on entire flight (may result in an extra fee). From some major cities we may have staff on the departing flight so there may be no charge, but from many cities our staff may have to fly into your home city to begin the tour, resulting in extra air ticket purchases.

STAFF RATIO:  Regular (1:4 ratio typically)  Extra-Assistance (1:2 ratio typically)  Your Personal Care Attendant (1:1 ratio)

Note: *Extra-Assistance* tours have a surcharge of 50% of your tour cost. *Personal Care Attendant* fee is 85% of your tour cost.

### PARTICIPANT INFORMATION

#### GENERAL INFORMATION: (Please Print!)

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

If home address is different from agency address to which address should trip information be sent?  Home  Agency  Address is Same

Home Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

If you would like tour information faxed or e-mailed to you: Fax Number: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Type of Living Situation (check one):  Family  Community Residence  Superv. Apt.  Indep. Living  Other \_\_\_\_\_

Agency Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Contact: \_\_\_\_\_

Agency Address (if different from home address): Street: \_\_\_\_\_ \* City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Agency Fax: (\_\_\_\_) \_\_\_\_\_ Emergency phone # (for nights or weekends): (\_\_\_\_) \_\_\_\_\_

Whom do we contact in case of emergency? (include night or weekend contact name) \_\_\_\_\_

Legal guardian name, if applicable: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Financial conservator, if applicable: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Person completing this application: \_\_\_\_\_ Relationship or Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

#### MEDICAL & PHYSICAL INFORMATION:

Physician: \_\_\_\_\_ Clinic: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Insurer: US Medical assistance (✓) \_\_\_\_\_ Canadian national insurance (✓) \_\_\_\_\_ Other (name) \_\_\_\_\_

US medical assistance, Canadian national insurance or private health insurance number: \_\_\_\_\_

Do you take any prescription medications? No  Yes  If 'Yes' **attach** medication list (time, dosage, prescription name)

Blind? \_\_\_\_\_ Eyeglasses? \_\_\_\_\_ Deaf? \_\_\_\_\_ Hearing Aid? \_\_\_\_\_ Dentures? \_\_\_\_\_ Prosthetic Device? \_\_\_\_\_

Smokes? \_\_\_\_\_ Recognize and report pain? \_\_\_\_\_ Memory Deficit Disorder? \_\_\_\_\_ Autism? \_\_\_\_\_ Diabetic? \_\_\_\_\_

If diabetic complete and attach/submit "Supplement for Travelers with Diabetes" form (request this if you do not have)

Known allergies \_\_\_\_\_ Diet restrictions \_\_\_\_\_ Language or communication difficulties \_\_\_\_\_

Seizures? \_\_\_\_\_ If seizures, please describe frequency and type and send seizure protocol: \_\_\_\_\_

Control of bowel and bladder? \_\_\_\_\_ If occasional incontinence, please describe below the frequency, times, and treatment: \_\_\_\_\_

Traveler's Name: \_\_\_\_\_

- MEDICATION SUPERVISION:**
- completely independent--holds meds and no reminders needed
  - keeps control of medication and only needs reminders to take
  - tour staff keeps possession of medications and insures medications are taken per med instructions

- SPENDING MONEY/MONEY MANAGEMENT:** (check one)
- can independently handle all money
  - can have some money (amount: \$\_\_\_\_\_), but needs assistance with purchasing
  - tour staff should keep control of all money

**SELF CARE SKILLS:**

	<i>Independent or Reminders</i>	<i>Supervision Only</i>	<i>Minimal Assistance</i>	<i>Full Assistance</i>
Dressing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toileting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SOCIAL/BEHAVIORAL INFORMATION:**

Check any which apply, and explain if necessary: Attach behavioral support plan

- |  |  |
|--|--|
| <input type="checkbox"/> Shy or withdrawn                                      | <input type="checkbox"/> Interacts inappropriately with opposite sex |
| <input type="checkbox"/> History of stealing (from others? ___ or stores? ___) | <input type="checkbox"/> Interacts inappropriately with same sex     |
| <input type="checkbox"/> Inappropriate touching                                | <input type="checkbox"/> Interacts inappropriately with children     |
| <input type="checkbox"/> Fabricates stories                                    | <input type="checkbox"/> Interacts inappropriately with strangers    |
| <input type="checkbox"/> Wanders   | <input type="checkbox"/> Physically aggressive (explain below)       |
| <input type="checkbox"/> Excessive talking                                     | <input type="checkbox"/> Verbally aggressive                         |
| <input type="checkbox"/> Excessive teasing                                     | <input type="checkbox"/> Self-injurious                              |
| <input type="checkbox"/> Particularly vulnerable (explain how)                 | <input type="checkbox"/> Other                                       |

Please describe any behavioral problems or behavioral idiosyncrasies and how to best handle them. Add additional sheets or enclose copies of behavioral programs if necessary.

What situations, if any, provoke anger, frustration, or outbursts, and how is this best handled?

**MOBILITY INFORMATION:**

- Fully ambulatory (walks without assistance)  Yes  No      Check if wheelchair is needed for longer distances only
- Other mobility devices used:  None  Walker  Cane  Other \_\_\_\_\_
- If wheelchair user, type of wheelchair:  Man. Wheelchair (self-propel)  Man. Wheelchair (needs to be pushed)  Electric Wheelchair
- Indicate type of assistance needed for transfers:  one-person pivot  two-person  other (explain): \_\_\_\_\_
- Can you support weight while transferring?  yes  no      Comments: \_\_\_\_\_

**SPECIAL NEEDS INFORMATION:**

Please describe any physical problems or physical disabilities, activity limitations, special equipment needed.

IS ALCOHOL O.K. (e.g. wine or beer with a meal)? \_\_\_\_\_ IF "YES," AND IF INTAKE IS LIMITED, HOW MUCH? \_\_\_\_\_

SWIMMING ABILITY \_\_\_\_\_ SPECIFIC FEARS (animals, dark, escalators, etc.) \_\_\_\_\_

**OTHER INFORMATION YOU WISH TO SHARE WITH US:**

**APPLICATION IS NOT COMPLETE AND PARTICIPANT CANNOT BE ACCEPTED ON THE TOUR WITHOUT THE SIGNED ACKNOWLEDGEMENT OF RISK AND PERMISSION SHEET!**

Traveler's Name: \_\_\_\_\_

# Search Beyond Adventures, Inc.

## Agreement of Risk, Waiver, and Terms

*Crossing out or modifying any part except the "PHOTOGRAPHS" section will result in the application returned to you without registration.*

**RISK:** Risk to body or property may be present in any travel experience. Some trips may take place in an area without immediate available medical attention, or outside the United States of America or Canada. Participants may wish to inquire about specific tour dangers from *Search Beyond Adventures, Inc.* prior to enrollment or departure and/or seek the advice of a physician.

**WAIVER:** Participants, or their guardians or agents, applying for this trip agree to participate at their own risk, and release and hold harmless *Search Beyond Adventures, Inc.* plus its staff and volunteers from liability for any harm to person or property that may occur due to self-injurious behaviors, actions by any other tour participant, voluntarily departing from the tour group, or malfunction of adaptive equipment. *Search Beyond Adventures, Inc.* will not be responsible for loss or breakage of personal items brought or purchased on the tour. **(Note conditions on reverse side)**

**MEDICATIONS:** Medications administration may be supervised by volunteers with limited training so all medications to be supervised by tour leaders and volunteers should be packaged by date and time in individual dosage packets ("med envelopes or similar") except for international tours.

**PERSONAL EMERGENCIES:** If participant has to be removed from the tour or needs additional staff attention for medical, behavioral, psychological, or other personal reasons, all costs of return or additional staffing will be paid by applicant or guardian. Such costs can include, but are not limited to: air fare, lodging, meals, vehicle rental, fuel, phone calls, and cost-of-hire for staff.

**PHOTOGRAPHS:** *Search Beyond Adventures, Inc.* is granted permission to use trip photographs of applicant for promotional purposes (e.g. catalogs, Web site) unless objection is stated here in writing before the tour.

**MEDICAL TREATMENT:** Staff or appointees of *Search Beyond Adventures, Inc.* are granted authority to register applicant for medical treatment if deemed necessary by said staff or appointees. We will first attempt to contact a guardian or careprovider, but if we cannot reach someone to grant permission for emergency treatment we will bring applicant for said treatment. Authorization for such treatment at the hospital or clinic and for "Good Samaritan" first-aid treatment is granted. *Search Beyond Adventures, Inc.* cannot assume responsibility for any medical expenses that may occur if the participant must receive medical care. Applicants are advised to carry their own medical insurance, medical assistance, or traveler's insurance, although such insurance may not cover you when in a foreign country.

**TRAVEL INSURANCE:** Optional insurance is available for all tours and offers medical coverage and/or cancellation protection coverage. Participant, or guardian or agent understands that if participant cancels the tour less than 30 days prior to tour departure date, the entire tour fee is non-refundable for any reason, including illness. If participant is traveling outside of home country public health insurance will not cover foreign medical treatment. Notification of cancellation penalties and offering of optional cancellation protection insurance is acknowledged.

**PERMISSION TO PARTICIPATE:** If participant is **not** his or her own guardian then permission is granted by the guardian for vacationer listed at top of this page to participate in travel vacations with *Search Beyond Adventures, Inc.*

I have read the information above and the **Terms and Conditions** on the reverse side, and agree to the terms and conditions stated therein, for: **(INITIAL one box)**

- (1)  ONLY the tour named on this application, (initial in box) **or**
- (2)  ANY tours named on this application and any new tour registrations you submit in the next 24 months (initial in box) (you will not need to sign a waiver for future tours within 24 months if you check option 2).

\_\_\_\_\_  
**Signature** (participant or legal guardian if assigned)

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Date**

### PAYMENT INFORMATION

TRIP FEE: \_\_\_\_\_

EXTRA STAFF RATIO FEES: \_\_\_\_\_  
 (50% surcharge of your tour cost, 1:2 ratio)  
 (85% surcharge of your tour cost, 1:1 ratio)

ANY EXTRA FEES: \_\_\_\_\_  
 (lodging upgrades, attendant charges, etc.)

TOTAL MERCHANDISE/INSUR FEES \_\_\_\_\_

TOTAL COST (add all charges) \_\_\_\_\_

AMOUNT ENCLOSED (20% minimum) \_\_\_\_\_

BALANCE (due 30 days before the tour) \_\_\_\_\_

### ADDITIONAL OPTIONAL CHARGES

SEARCH BEYOND T-SHIRT (circle size) \_\_\_\_\_  
 Short Sleeve Sizes: S M L XL XXL (\$19)  
 Long Sleeve Sizes: M L XL XXL (\$23)

SEARCH BEYOND SWEATSHIRT (choose) \_\_\_\_\_  
 Sizes: M L XL (\$38)

TOTE BAG (\$22) \_\_\_\_\_

FANNY PAK (\$15) \_\_\_\_\_

CAP (\$18) \_\_\_\_\_

OPTIONAL TRIP MED/CANCEL INSURANCE:  
 Cancellation Credit Waiver (\$49) \_\_\_\_\_  
 Cancellation Refund Waiver (variable cost) \_\_\_\_\_

**Search Beyond Adventures will purchase any necessary air and train tickets.**

Mail to: **Search Beyond Adventures**  
PO Box 18  
Brimfield, MA 01010

or  
Fax to: (413) 245-3600

Email to: [travel@searchbeyond.com](mailto:travel@searchbeyond.com)

# TERMS and CONDITIONS

## CANCELLATIONS, REFUNDS, CHANGES

Whether you register for a tour by phone, fax, internet, mail, or in person, such registration authorizes us to (1) sell a space on the tour to you with standard cancellation policies, (2) send you an invoice for the tour, and (3) purchase any air, train, cruise, or activity tickets for your tour.

If you decide to cancel the tour you must notify us by letter or by fax. Cancellations received more than 60 days prior to the departure date (90 days for cruises) will receive refund less a \$75 cancellation fee. Cancellations received 30-60 days prior to tour departure date (60-90 days for cruises) will receive refund less a \$150 cancellation fee. Cancellations received less than 30 days prior to departure (60 days for cruises) are non-refundable. In addition, if we have already purchased airline or other non-refundable tickets for you per your tour registration (see paragraph one above), we will charge you for these tickets and mail you the tickets to use towards possible future travel. We cannot give air ticket refunds even for cases of illness. We are purchasing the tickets only as an agent, on your behalf and per your order. Any requests for ticket cost refunds must be done directly with the carrier. Cancellation insurance may be purchased from us for all tours.

If we decline to accept your application because of lack of space or because we are unable to accommodate your special needs we will refund your deposits in full.

If you are more than 30 minutes late for your tour departure, you will be considered a "no-show", and you will forfeit the entire trip fee.

## LIABILITY LIMITS

Search Beyond Adventures, Inc. shall not be liable for any bodily injury or property damage that may result from weather, theft, civil disturbance, or strikes. Furthermore, Search Beyond Adventures, Inc. reserves the right to substitute accommodations, transportation, activities, leaders, and to alter the itinerary when necessary. If this is necessary, substitutions will be of a similar nature whenever possible.

Search Beyond Adventures, Inc. also reserves the right to modify prices and trip dates. If this is necessary we will give you as much advance notice as possible. Search Beyond Adventures, Inc. reserves the right to decline to accept or keep any applicant or participant whose actions or condition impedes trip operations. If you need transportation home due to illness or behavior you will bear the full cost of such evacuation.

Search Beyond Adventures, Inc. shall not be responsible or liable for any damages due to public transport misconnection caused by transport delays, transport cancellations, or lack of supervision or guidance to you by public carriers. On tours involving airlines, public buses, or trains, our responsibility begins only when the carrier has turned you over to us and ends when we turn you over to the carrier. Public transport carriers have the right to refuse to transport anyone they believe is incapable of safely traveling alone.

## GETTING TO THE DESTINATION

Search Beyond Adventures has two types of tours. Some tours leave by bus from one of our hub cities. For these tours, if you live outside the departing city, we will pick you up en route, if possible, or make travel arrangements to meet you at the destination city. Other tours depart by air. For these tours we will make all flight arrangements and bill you separately for any airfare not included in the original price. We will also request from the airlines their assistance to you during the flight or at connecting airports. Please note that although we request this service on your behalf, the airlines are responsible for your care until they present you to our tour staff, and you should confirm this airline service at check-in (airlines may differ in type of service provided). On air tours we will meet you at your destination's arriving gate or in a connecting city. If you need to have staff on your flight, please request this on your application and we will notify you if this can be arranged.

If you are arriving by public bus or by train, we will arrange to meet you at the station, and bring you to the station when the tour returns.

## POST-TOUR CHARGES

If we incur any of the following charges on your behalf during your tour you will receive an invoice for such charges after the tour. These charges include, but are not limited to: your long-distance phone charges, pay-TV charges, charges made by airlines for special assistance, excess baggage charges, evacuation charges, unscheduled drop-off charges, toiletry, clothing, or medical charges we made on your behalf, and extra lodging or meal charges caused by public transport delays or weather.

## SUPERVISION & ASSISTANCE LIMITS

Search Beyond Adventures, Inc. provides assistance on each tour, but the exact level of assistance varies with the tour type. Our *Regular* tours are planned at approximately a 1:4 staff to participant ratio. This means one of our tour leaders or volunteers for every four vacationers. On *Extra-Assistance* options we have approximately a 1:2 staff to participant ratio. The actual ratio for any particular tour can vary from these guidelines, but the ratio would not vary by more than one more participant per staff person. If a greater variance is needed due to staffing problems we will contact you to discuss with you the options of either dropping from the tour without penalty or staying on the tour with the new staff ratio. The above ratios apply at the destination, not on transportation to the destination.

Search Beyond Adventures, Inc. does not guarantee in-room 24 hour assistance. Our staff assist people while in the community and during normal awake hours while at lodging. Our staff stay on-site at the lodging, of course, but we generally do not have staff sleeping in the rooms with participants, unless there is a need for physical assistance (e.g. wheelchair transfer) at night, or if night supervision has been pre-arranged.

## ACCOMMODATIONS & MEALS

Unless you pay for an upgrade, most tours are based on double-occupancy rooms: two beds per room. Some hotels offer triple rooms (three beds per room) in which case you may share a room with two other people. We do not use roll-aways, sofa beds, or similar for customers. Unless registering as a couple all participants have their own beds.

All meals are included on the tour but not on any plane travel from your home airport to the destination. If you are traveling by air we do not pay for meals on the plane. If the airline does not serve a meal you may have the option of purchasing food aboard, or you may have an opportunity to purchase food at a connecting city during flight transfer. Generally, you pay for desserts and alcoholic beverages you may have. Breakfasts are usually served in the hotel ("continental") with lunches and suppers eaten at restaurants.

## GUARANTEE

If you are not satisfied with your Search Beyond Adventures tour we will give you a similar tour of equal value free! However, commercial transportation charges, e.g. air, train, and cruise charges are excluded and will be deducted from the credit. Such credits are non-transferable and may not be exchanged for cash. You are ineligible for this guarantee if you voluntarily or involuntarily left the tour prior to its completion. This guarantee does not apply to conditions caused beyond our control, e.g. adverse weather or transportation delays, for conditions that may arise from vehicle breakdowns, for lost or broken personal items, or for custom groups. Any request for replacement tour must be made within 30 days of completion of original tour.

## ARBITRATION

You or your guardians agree that, on the petition of either party willing to advance the applicable filing fee, any claims that may arise from your tour will be settled through arbitration of the American Arbitration Association.

## Program Application Checklist

(this is to assist you; you do not need to return this checklist)

**With your application please send the following:**

- \_\_\_\_\_ Photo (do not fax--it will not be clear)
- \_\_\_\_\_ Government issued ID card copy (if tour is by air)
- \_\_\_\_\_ Passport copy (for international tours)
- \_\_\_\_\_ List of medications (unless "no medications")
- \_\_\_\_\_ Medical insurance card copy (if you have insurance)
- \_\_\_\_\_ Minimum 20 percent deposit
- \_\_\_\_\_ Signed and dated application (page four)