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|  | Songea's Kids Logo |

# 2024 Songea’s Kids Friends-to-Friends Trip Reservation Form

Travel Begins in Dar on 9/17/24.

Reservation Forms and Deposit Due: 3/16/24

## Applicant Information

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| --- | --- | --- | --- | --- | --- |
| **Full Passport Name:** | Last Name | First Name | Middle Name | **Date:** | Today’s Date |
| **Address:** | Enter Street Address | Enter Apt # |

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| --- | --- | --- | --- |
|  | Enter City | Pick State | Zip Code |
| **Cell Phone:** | Enter Phone # |  **Email:** | Enter Email |

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| **Passport Number:** | Passport # |  **Country:** | Passport Country | **DOB:** | **Birthday** | Expiration**:** | Exp Date |

|  |  |
| --- | --- |
| **Emergency Contact:**  | Emergency Contact Name (F MI L) |

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| --- | --- | --- | --- |
| **Phone:** | Emergency Contact Phone  | **Email:**  | Emergency Contact Email |
|  | [ ]  I have a travel partner: | Name: | Travel Partner Name (Must have reservation) |
|  | [ ]  I want the Optional Safari to Mikumi and Ruaha National Parks. |
|  | [ ]  I would like the option to extend my stay in Songea. |

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| **Do you have any physical or dietary special needs that would require accommodation?** Describe below |
| Click or tap here to enter text. |

## Disclaimer and Signature

I understand that a non-refundable deposit of $500 will hold my place. This will be applied to costs of my trip. The deposit must be paid to Songea’s Kids via our Donation Page selecting 2024 Friends-to-Friends trip. Payment can be made by credit card (plus service fee) or by ACH. Checks made payable to Songea’s Kids are also accepted and can be mailed to Songea’s Kids mailing address.

Songea’s Kids

3020 Issaquah Pine Lake Rd. SE, #539

Sammamish, WA 98075 USA

Email this form to info@songeaskids.org.

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| --- | --- | --- | --- | --- |
| **Signature:** |  | Enter Full Name in lieu of written signature  | **Date:** | Today’s Date |