General Terms for Registration*

- 1. A non-refundable trip deposit (see flyer, group organizer or contact our office for deposit amount) per applicant and a completed and signed Registration Form (or online registration) are required to secure a reservation.
- 2. The trip deposit is due by the pre-established published deadline (see flyer, group organizer or contact our office for deadline). The trip deposit reserves your space and is based on space available at time of booking and will applied to your final trip balance due. If space is not available when your payment is received, we will retain your payment and place your name on a waiting list until space becomes available or a cancellation request, in writing, is received.
- 3. Final trip balance due is required 75 days prior to trip departure date (see flyer, group organizer or contact our office for trip date).
- 4. All trip payments can be made to USA Student Travel, by check, money order or credit card (Visa, MasterCard, Discover Card). Please do not send cash (we are not responsible for lost cash payments). Credit card charges will appear as GET-USA-ADVEMER TRAVEL on your credit card statement. When you the client provide a check as payment, you authorize us the company either to use information from your check to make a one-time electronic fund transfer from your account in the amount noted or to process the payment as a check transaction. For inquiries, please call the corporate office at 916-939-6805.
- 5. Please make payment(s) online at www.USAStudentTravel.com or mail to our offices at USA Student Travel, 5080 Robert Mathews Parkway, El Dorado Hills, CA 95762. For final payments received up to 2 weeks after the set Final Payment date, there will be a \$15 late fee. For payments received 2 weeks after the set Final Payment date there will be a \$30 late fee. There will be a \$35 service charge for returned checks and a \$10 service charge for declined credit cards.
- 6. *For a complete list of our Trip Terms & Conditions, please visit our website and review our Full Terms & Conditions at <u>www.USAStudentTravel.com</u>.

If you have not received an email confirmation within 2 weeks from submitting this form, please contact our office to verify your contact information. All documentation will be sent to you at the email addresses listed above. USA Student Travel is not responsible for invalid contact information.

For any questions, please contact our offices Monday-Friday, 8:30am to 5:00pm Pacific Time at (916) 939-6805 option 4 Or email us at info@USAStudentTravel.com

By my signature below, I agree to the above general terms for registration above and acknowledge that I have been informed of, reviewed and consent to the Full Terms & Conditions as stated on the USA Student Travel website. Additionally, I hereby consent to my child, if under the age of 18, to register for this trip, pursuant to your Terms & Conditions and Privacy Policy. I further consent to your collection, use and disclosure of my child's personally identifiable information, pursuant to the terms of, and as fully described in, the Privacy Policy. I hereby consent to the potential for price increases as set forth in full terms & Conditions under items 4 and 8, including the use of photo and likeness in accordance of item 16.

Required Signature of Legal Guardian/Parent:							
			Date:				
Email (please print clearly)		Parent/Guardian Phone: ()					
Registration & Paymen	t Form:	You	ı can also sign u	o online at www.U	ISAStudentTrave	el.com	
Name of School or group you ar	e travelling with:						
Traveler First Name:		Traveler Last Name			Date of Birth:		
□ Male □ Female	□ Student(Quad)	Adult (Double)	□ Please che	ck if student is disable	ed or special needs (s	see terms and conditions §15)	
Traveler Email (please print cle	early)			Cell Phone: ()			
Mailing Address:				City:	Sta	ate:Zip Code	
Payment Information: : (Make P	ayable To: USA Stu	dent Travel)	NOTE: E-Check and	Credit/Debit card state	ment charges will appe	ear as <u>GET-USA-ADVEMER TRAN</u>	
E-Check: I (we) hereb indicated below at the deposit origination of ACH transaction	ory financial institution	on name below, hereina	after called DEPOSIT	DRY, and to debit the			
Checking Account Holder Name	•	Checking Account Number			Billing Zip	Billing Zip Code	
Issuing Bank Name	Bank Routing Numb			Routing Number			
Credit/Debit Card:	Total Amou	nt approved to charge to	day \$				
Credit/Debit Card Number:			Expiration Date: _	CVC #:	Billing Z	lip Code:	
Name of Cardholder (PRINT): _				Signature:			
☐ Please Automatic Charge Final Payment Date. Note: If							
☐ <u>Yes, Please enroll me in the</u>	"Full Refund Program	(FRP)" (see terms and con	ditions) Additional cost is \$	99.00			
USA Stu	dent Travel 5	080 Robert J Ma	athews Parkwa	ay, El Dorado H	ills, CA 95762.	916-939-6805	

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