GRANCOILEGE BURS

Student Information

First Name	Mid	dle Name	Last Na	ame	
Birth Date//	□ Male	Female []		
Home Address					
City		State	e Zip		
Home Phone: ()			Student's Cell : ()	
Student's Email:					
				Grade (entering this fall)	
Parent #1 Name		Phone ()	Cell ()	
Email					
Parent #2 Name		Phone ()	Cell ()	
Email					
Roommate/Friends Name (optic					
Emergency Information (if	different from	above)			
Name			Relationship		
)	

I have read the Grand College Tours rules and regulations and the Grand College Tours Terms and Conditions. I will complete the Medical Release Form prior to departure.

Parent/Guardian Permission: As a legal guardian I give permission for the registrant to participate in all phases of Grand College Tours activities and off-site trips. I hereby assume all risks or loss and injury that may be incurred, directly or indirectly, as a result of such participation. I understand and agree to cooperate with all regulations. I have read the Grand College Tours Rules and Regulations and Terms and Conditions. I will not allow registrant to attend if not in good physical condition. In an emergency, when the undersigned or other person named cannot be reached, I give permission for the camp authorities to take any emergency measures deemed appropriate. It is understood that all reasonable efforts will be made to contact the parent/ guardian. I understand that when participating in Grand College Tours activities the registrant may be photographed for print, video or electronic imaging. I understand that the images may be used in promotional materials, news releases and other published formats, and will be the sole property of Grand Edventures, Inc. its assigns or successors.

Grand Edventures, Inc. reserves the right to reschedule or cancel a tour with fewer than 20 travelers. If an insufficient number of travelers register for your tour, we will offer you a choice: pay a Small-Group Supplement Fee to allow the tour to operate; choose another tour and/or departure date with a sufficient number of travelers; or cancel your tour without penalty. This application will be approved when Grand Edventures deems it accepted. Deposit is non-refundable, final payments are due within 30 days of departure. No Refunds 30 days prior to tour.

Student's Signature	Date
Parent's/Legal Guardian Signature _	Date

Spring Break: March 16 - March 18, 2026 Summer: June 8 - June 10, 2026 \$699 Per Student + \$149 Grand Travel Ease (Gratuities, Taxes, All-In Price \$848) Includes Charter Round-trip bus from Coral Springs or Boca Raton, Florida, double hotel accommodations (2 students per room), 3 meals daily, campus visits/tours, sightseeing and evening activities.

Charter Round-trip bus from	Coral Springs/Parkland	Boca Raton	West Palm Beach/Lake Worth	Orlando

Deposit of \$300.00 is required. Checks Payable to GRAND COLLEGE TOURS Mail to: Grand College Tours, P.O. Box 970694, Boca Raton, FL 33497 or Scan and email to: info@grandcollegetours.com

VISA	_MC	AME	X	DISCOVER	۲ 	CHEC	K ENCL	OSED
Credit Card No)							
Expiration Date	e	_/	Security	/ Code:				

Signature:



www.grandcollegetours.com (954) 354-1080