Nomads of Hope, Inc						Trip Registration	
Trip Participant							
Name (full legal name as it appears on passport)						Date of Birth	
Address						Primary Phome	
City				State	Zip Code	Age	Gender
email address							
Parent or Guardian if trip participant is under 18 at the time of registration							
Name		•				Relationship to	Participant
Address						Primary Phome	
City					Zip Code	Other Phome	
email address							
Trip Information							
Country: Ecuador Location: Cuenca						Begin	7/25/2025
Type: Cultural immersion, community projects, family home-stay, and an after trip to one of several locations in Ecuador TBD.						End	8/3/2025
Payment	Amount	Due Date	Registration Requirements D			ue by 4/1/20	25
Total Trip Cost	\$1,200.00	Inquire about discout opprtunities	Your passport must be valid through February 2026				
			Provide a c	a color copy of your passport and one other photo ID			
Registration Deposit	\$500.00	1/15/2025	Purchase trip cancellation insurance				
			Provide proof of medical and accident insurance valid in Ecuador				
Balance in Full	\$700.00	4/1/2025	A completed Nomads of Hope Health Profile				
			A complete	ted Nomads of Hope Volunteer Release & Waiver			
Included in the cost of the trip  Not included in the cost of the trip							
Pick up at Cuenca Airport or Bus Terminal with trans. to lodging Any souvenirs you purchase							
				Extra activities on the after-trip			
A Nomads of Hope T-Shirt				Extra food and drinks			
All group activities while in Cuenca  Any medical expenses  All planned group activities on after-trip							
I understand that	the planned itiner	ary could change			cumstances such as we anges to the itinerary on		
Refund Policy:					on a limited basis (see refunded.	website for	r details). In the
		, , , , , , , , , , , , , , , , , , ,					
Authorized Signature  For participants under the age of 18, this form must be completed and signed by a parent or guarding. By signing this registration form I agree to the above payment terms and all policies and requirements.							
Signature						Date	
						form R	01-version3-2024
Printed Name							