



GENEVA COLLEGE *in Italy*

Name: Print your name as it appears on your passport. If you do not have a passport yet, list your name as it will appear on your passport: _____

☐ I will not be enrolling in HUM 301, but will participate in the trip portion only.

Date of Birth: _____ **Country of Citizenship:** _____

US Passport Number: _____ **Geneva ID #** _____

Passport Issue Date: _____ **Expiration Date:** _____

If you do not yet have a passport, please apply for one immediately. Visit <http://travel.state.gov/passport/> for full information. If you have a passport, provide a copy of the photo and signature pages with this application.

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Preferred Phone: _____ **Alternate Number:** _____

Cell Phone Carrier: _____ **E-mail Address:** _____

Do you have any special needs or health issues? If so, please detail those here (use additional paper if necessary):

☐ Enclosed is a check for \$500 to reserve my space on the trip to Italy. (Please make check payable to Geneva College.) I understand that, if I cancel my participation, I will forfeit half of my deposit (\$250). Final payment is due by January 31, 2017. Refer to the refund policy that applies after January 31, 2017.

I have read, understand, and agree to the provisions outlined in the itinerary and information materials provided, including the refund policy.

Signature: _____ **Date:** _____