

2010

Leisure Time Travel Registration Form

Senior Services of Polk County
1914 Carpenter Ave
Des Moines, Iowa 50314
515-286-3536

Trip/s # or Date of Trip/s or Destination/s _____

(This form may be used for more than one trip). Insert each trip # on this form that you plan to go on).

Please **Print** the following. Must fill in **ALL** information

Traveler's Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Cost of Trip _____ Total Amount Enclosed _____ Cash _____ Check # _____ CC Type: _____

**Payment Information

Please make checks payable to: Polk County Treasurer and make sure to write the Trip # in on the memo line of the check. Please mail or deliver this form and payment to Senior Services of Polk County – Leisure Time Travel - 1914 Carpenter Ave. Des Moines, Iowa 50314.

Have you sent your medical form? (for current year) Yes No Enclosed
(only need to send in one Medical Form per calendar year)

If we do not have medical form from you for this year, please send your completed medical form with this registration form. We must have the signed medical form in our office **at least 2 weeks prior to the trip.** A final itinerary will be mailed out usually within a week to 10 days prior to the actual trip date for those registered to go. You can get a medical form at any Polk County Meal Site, by calling 286-3536 or going on to the website at <http://tinyurl.com/2ncaa6>.

Please indicate below which pick up location you prefer. If you do not indicate which location, we will assign one to you.

I want to meet the bus at the: (check one) East South West pick up location.
Walgreens/Slumberland HyVee parking Dahls parking lot/
Parking Lot E. 26th & Euclid lot/Southridge Aurora & Merle Hay Rd

I have read and understand the travel policies and procedures:

In consideration of your acceptance of this registration, I hereby, for myself, my heirs, executors, and administrators, waive any and all rights and claims for damages I may now or hereafter have against individuals associated with this program, their agencies, representatives, successors, and assigns for any and all injuries suffered by me during said program. I certify that I have full knowledge of the risks involved in this program and that I am physically fit and have no medical or physical conditions that prevent my participation in it. I give my permission for the use of my name and picture in any broadcast, telecast or print media account of this program.

Signature _____ Date _____

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MEDICAL REGISTRATION FORM
Leisure Time Travel – 515-286-3536
A Program of Polk County Senior Services

Please **PRINT** all information **CLEARLY**:

Name _____ Name You Want to be Called _____

Address _____ Phone/s _____

City _____ Zip _____ Birthdate _____ Age _____

Driver License # _____ Email address _____

MEDICAL INFORMATION

Doctor's Name _____ Phone _____

Insurance Carrier _____

Subscriber Number _____ Group Number _____

Hospital Preference _____

In case of illness or accident, whom shall we contact? Provide multiple numbers, if available.

Name _____ Relation _____ Phone Number/s _____/

Name _____ Relation _____ Phone Number/s _____/

Are you taking any special medications? If so, what? _____

Do you have any allergies? If so, what? _____

Do you have any medical conditions? If so, what? _____

Are you on a special diet? If so, explain _____

Signature _____ Date _____

Please send your completed medical registration with your FIRST trip registration. Only one updated medical form is needed per year.

There must be a completed form in our records before you can go on any trips.

Prior to Departure
This Form Must be Mailed to:
Senior Services of Polk County/Leisure Time Travel
1914 Carpenter Ave
Des Moines, Iowa 50314
Attn. Daiynna or Connie

2010

Leisure Time Travel - Policies & Procedures

Trip Information – Call 286-3536 or visit our website at

www.polkcountyiow.gov/CFYS/pages/calendar.aspx or <http://tinyurl.com/2ncaa6>

1. Program participation is available to any adult 21 or over desiring to travel with Polk County's group tour. Anyone who cannot travel independently or who needs special assistance must notify our department by the tour deadlines to see if accommodations can be made (medical verification, may need to be provided). Please remember that some trips require a lot of walking and/or stair climbing (which will be indicated on the tour itinerary). If you are unable to walk long distances or cannot climb more than 4 steps, please consider this information carefully on determining whether if taking this particular trip would be best suited for you. You also may consider inviting a traveling companion to assist you. **Escorts are not expected to help you on and off the bus or to act as a traveling companion.** They are expected to make sure that everyone is accounted for on the bus both going and coming and to make sure everyone has a safe, enjoyable trip.
2. The Medical Registration form is **required** each year. This form **must be received** by Polk County at least two weeks prior to trip departure. **We will not accept your medical registration if it does not list your medications or the name/s and telephone numbers of someone to reach incase of an emergency. You will not be allowed to travel with us without a completed and signed Medical Form.** Why not fill it out now and send it in, so you're ready for any or all the year's trips?
3. Reservation deadlines are also cancellation deadlines. Please take notice of these dates as we may not take any reservations or cannot give refunds after the deadlines.
4. **A minimum deposit (amount depending on trip) is required** at time of registration for all day trips. Final payment is due no later than the registration/cancellation deadline. The deposit is non-refundable if cancellation is not received by the registration/cancellation deadline. **Mail to: Leisure Time Travel, 1914 Carpenter Ave., Des Moines, Iowa 50314.** All returned checks will be assessed a surcharge of \$25.00.
5. We now have credit card capabilities (Visa & Master Card only). You may either stop by or call (515) 286-3536, and we will process your transaction. **Checks payable to: Polk County Treasurer**
6. You will receive a receipt in the mail when we receive your payment. Approximately seven to ten days prior to departure, you will be mailed a complete final itinerary. **Please read your itinerary carefully, as changes may have occurred since the general trip itinerary was published and distributed.** We will give pertinent information (hotel names & phone numbers, pickup/drop off order and times, etc.) in the complete final itinerary. Mystery trips are a "mystery". Don't expect much information to be disclosed.
7. A larger deposit amount toward full payment on multi-day trips is required at registration, with the **balance being due** by the registration deadline.
8. Refunds can only be given after a deadline has passed if there is someone on waiting list that takes the cancelled reservation or a replacement is found. Refunds/Credits will be made if cancellation was made by the registration/cancellation deadline. The earlier you cancel, the easier it is to get a replacement from the waiting list. However, there are no guarantees. **A \$5.00 charge will be assessed against any refund amount, no matter the reason.** Full refunds will be made in the event a trip is cancelled by tour manager prior to departure or you may choose to use towards a credit on a future trip. If for some reason a trip has to be cancelled midway or enroute due to

extreme uncontrollable circumstances (weather or closings, etc. to be determined by staff, host and driver) refunds may be available on a pro-rated basis (after determining costs involved at the point of cancellation, each traveler will be notified)..

9. **The quoted price for each tour includes only those items specifically mentioned on the itinerary.** Any meals, beverages, desserts or items other than those listed as “included” will be at the participant’s own expense. The participant must pay for the cost of items of a personal nature such as cocktails, phone calls or personal purchases.
10. Necessary fees/gratuities to transportation, waiters, waitresses and local guide charges are included for all items specifically mentioned on the itinerary, unless otherwise stated. Extra gratuities (tips) for exceptional service are not included. It is up to participants if they want to “tip” additionally, and should **NEVER** be considered a necessity. Tips for the tour escorts are neither necessary nor encouraged. Tipping the driver is not necessary, but is at the discretion of the trip participants an envelope is available on each trip to do so.
11. Buses will load at three pickup sites. The **South** pickup site is the HyVee, at Southridge Mall. Please park as far east in the parking lot as possible. **West** pickup site is in Dahls/Eldorado parking lot at Merle Hay Road and Aurora. Please park in the northwest parking lot, south of Eldorado. **East** pick up site is in the Walgreens/Slumberland Parking lot, at E/ 26th & Euclid (across from HyVee). Please park in between the Walgreens building and Slumberland Building. **Please indicate your pick up site choice on the trip registration form. If you fail to indicate where you want to be picked up, we will assign you a pick up location.** If you find you need to change your pick up point, please call this office (286-3536), at least one week prior to the trip. Occasionally, there may be trips that not all three pick up sites are included. This will be stated clearly in the itinerary
12. **Please remember that the escorts are Volunteers and are NOT tour guides.** They have a responsibility of keeping the names of attendees, make sure that everyone is picked up, making sure the itinerary is followed, checking in with contacts at the trip destinations and making sure everyone is back on the bus between each stop and when we start home. They may also perform other duties as assigned or asked by the Tour Program Manager.
13. The front seats behind the bus are reserved for the escorts. No other seats are reserved unless doctor ordered and then, we will do our best to accommodate if such order is provided. However, there are no guarantees and this will be communicated with that individual on a situational basis. Such special needs circumstances need to be made aware to the Tour Manager well in advance of the actual trip. On short trips, you will occupy the same seat all day. On longer trips, a seat rotating system will be used at the discretion of the trip escorts. Should the need arise, trip escorts reserve the right to assign seats.
14. We ask that you refrain from drinking alcoholic beverages or smoking while on the bus.
15. In the event a traveler misses the bus or experiences illness or an emergency, he/she must assume any additional costs at his/her own expense.
16. Please be a cheerful traveler. If plans should be altered, please accept them graciously.
17. Disrupting the tour or its participants, acting/speaking/gesturing obnoxiously or being rude to other participants, escorts or guides is not acceptable and will not be tolerated. Disciplinary procedures will be taken, if needed, as determined by Tour Manager. Future participation on trips may be jeopardized by such behavior. We reserve the right to refuse Service.

3 ways to Register

1. Send payment in US Mail with registration/medical form.
2. Deliver personally to 1914 Carpenter office. Complete registration/medical form w/ payment, if needed.
3. If paying by Credit Card, call or stop into the office and mail/bring in registration/medical form.

****Remember we only need one copy of the medical form per year.**

Points to Remember

1. Seats are available on a “first-come, first-served” basis.
2. Registration requires a deposit to hold your spot, trip is confirmed when final payment is made.
3. To ensure your reservations, plan early!!