

HOUSING AND TRANSPORTATION FORM

Please return these forms **no later than 4 weeks** prior to the beginning of your program to:
Pacific Islands Institute/Road Scholar Program
3566 Harding Avenue #202
Honolulu, Hawai'i 96816
FAX # (808) 732-9555

PROGRAM NUMBER YOU ARE ATTENDING: 12294

PROGRAM DATES: _____

Your Name as listed on the I.D. you will be using for airline check-ins; if you have a middle initial or name listed on your I.D., please include it below:

Last	First	Middle Name or Initial
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Traveling Companion's Name (if applicable) as listed on the I.D. he/she will be using for airline check-ins:

Last	First	Middle Name or Initial
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Name/Nicknames you wish printed on nametag: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Phone: _____ E-Mail: _____

ACCOMMODATIONS

Non-smoking Smoking

People traveling independently will be assigned to a room with two beds. If traveling with a roommate, do you prefer:

One Bed Two Beds

(We will do our best to obtain your preferred bedding arrangements, but can make no guarantees.)

HAWAII ARRIVAL & DEPARTURE INFORMATION

Please note that you need to arrive in Honolulu, O'ahu (HNL) and depart from Līhu'e, Kaua'i (LIH)
After you have made your own reservations, please complete the following.

If your plans change, please notify us.

Arrival Date _____ Airline _____ Flight # _____ Arrival Time _____

Departure Date _____ Airline _____ Flight # _____ Departure Time _____

If you are arriving prior to your program's start date or departing after your program's end date, where will you be staying?

Before Program _____

Dates _____

After Program _____

Dates _____

PERSONAL INFORMATION

Please fill out this information. It will assist us in getting to know you. If you are traveling independently, please skip the questions referring to Traveling Companion.

Are there any birthdays or anniversaries during your program with us? (If so, please tell us the date and occasion):

Your talents and interests _____

Traveling Companion's talents and interests _____

The one thing I would most like to see, learn, or do during this program is _____

Traveling Companion (same question as above) _____

Have you attended a **Pacific Islands Institute** Road Scholar Program before?

Yes No

When? _____

Where (Hawai`i – O`ahu, Maui, Kaua`i, Hawai`i Island; South Pacific)? _____

What program format? (Land-based, Shipboard, Active - Snorkeling, Cycling, Hiking/Surfing/Kayaking, etc.)

US Programs Health & Safety Form

Program # and Date _____

Name (*legal name*) _____

Nickname (*for name tag*) _____

Home Address _____

Home phone _____

Cell phone (*or alternate phone*) _____

Age _____ Birthday (*mm/dd/yyyy*) _____ / _____ / _____

Female

Male

Nonsmoker

Smoker

Traveling Companion/Roommate Name (*if any*) _____

Person to notify in event of an emergency / next-of-kin (*someone other than your traveling companion*):

Name _____ Relationship _____

Home phone _____ Cell and/or work phone _____

MEDICAL INFORMATION AND RESTRICTIONS (*Please read information on reverse before completing this section*)

Do you have **medical condition(s)** such as allergies, injuries, diabetes, emphysema, heart condition, seizures, recent surgery, or others that would be important to know about in case of an emergency? No Yes

If "Yes," please specify:

Do you have any **impairment(s)** or **restriction(s)** such as impaired mobility, hearing, vision, etc., that may prevent you from participating fully in the entire program as described by the program description or may require special rooming and/or arrangements, equipment, or assistance for you to participate in the program? No Yes

If "Yes," please specify:

Do you use or transport any of the following items? Cane Walker Wheelchair Scooter Oxygen CPAP

If "Yes," please specify which one(s), the extent to which you depend on the item(s), and if you will bring to the program:

Do you require prescription or other medication(s) on a regular basis? No Yes

If "Yes," please list and indicate reason(s) for taking (attach another page if more space is needed):

Do you have any **restrictive food allergy(s)**? No Yes
If "Yes," please specify:

**Please note: Participants, not Road Scholar or Program Providers, are solely responsible for making sure they do not consume foods to which they are allergic.*

Is there any additional information you would like us to know?

Do you have private medical/accident/illness insurance coverage (other than Medicare)? No Yes
If "Yes," please specify:

Name(s) of Insurance Company(s) and Policy Number(s)

Primary Care Physician (Road Scholar reserves the right to contact your physician) Phone (24-hour emergency # if available)

Medical & Physical Needs

Road Scholar is committed to providing reasonable accommodation to enable individuals with special medical and physical needs to participate in our programs. However, Road Scholar cannot ensure your comfortable participation if you have not shared your individual needs with us in advance. Road Scholar catalogs and our website request that you share your individual needs with Road Scholar at the time of your registration. **If you have not already done so, you must do so now by calling Road Scholar's Participant Services team toll free at (877) 426-8056, not the Program Provider, so that we can determine if your needs can be accommodated.** After consulting with the Program Provider and personnel at the program sites, Road Scholar will contact you with further information on matters such as the suitability and functionality of your requests, the physical demands of the program, or the availability of dietary options. If you do not call to advise Road Scholar of your requirements

or special needs well in advance of your program, we may not be able to accommodate your requests once you arrive on the program. Please note that special dietary requests **CANNOT** be guaranteed. Alternative meal choices are available only if specifically offered (see Road Scholar catalogs and website for meal options) AND requested in advance.

Terms and Conditions

The granting or denial of admission to a program is within the sole discretion of Road Scholar. Road Scholar may revoke admission or limit or terminate participation at any time if, in the opinion of Road Scholar, a participant's condition, behavior or actions are problematic, inappropriate or disruptive. Road Scholar reserves the right to take action as needed on an individual or group basis when, in Road Scholar's sole opinion, the health, safety or well-being of participants requires such action. With this in mind, carefully consider the travel and program demands as

described in Road Scholar materials and consult with your physician about participating well before departure. If you are not confident in your abilities and wish to reconsider your enrollment in the program, please call Road Scholar toll free at (877) 426-8056 and we will be happy to assist you in finding a more suitable program.

Emergencies

As noted in the **Road Scholar Travel Assistance Plan** brochure included with your enrollment notice, emergency evacuation insurance is included in the cost of your program. Should you become ill or injured during the program, notify program staff as soon as possible. They will make every reasonable effort to find local medical help. It is essential that you include on this form all information that would be important to know in an emergency or that could affect your participation in the program.

Every individual enrolled in a Road Scholar program is required to complete, sign and return this confidential form to the Program Provider noted to the right no less than **three weeks** prior to the start date of the program. **Failure to submit a signed Health & Safety form no less than three weeks prior to the start of your program may result in the termination of your program enrollment.**

I have read, understand and agree to the terms and conditions as described above and declare the answers to the above questions are true and complete. I attest that I am in good general health and capable of performing all program activities as described by the program description and its corresponding Activity Level.

Signed

Date

Return this form to:

GENERAL HEALTH QUESTIONNAIRE

Your responses to the questions below will help us better understand the experience and needs of the group prior to arrival. Please respond to all questions and be candid. Your responses will not disqualify you from participation. If you are not comfortable with any part of the adventure program, you can always choose not to participate in a given activity. If you have any questions or concerns, please feel free to contact us for further information.

GENERAL HEALTH QUESTIONS:

Do you exercise regularly? Yes No

If so, what sort of exercise do you do? _____

How often (e.g. 1x per week)? _____

How long are your exercise sessions (e.g. 20 minutes, 1 hour)? _____

Can you swim? Yes No

Have you ever swum in the ocean? Yes No

Have you ever hiked before? If so, when was the most recent time? _____

IF YOU ANSWER “YES” TO ANY OF THE FOLLOWING QUESTIONS, PLEASE DESCRIBE IN THE SPACE BELOW OR ON A SEPARATE SHEET OF PAPER:

Do you have any balance problems or experience dizziness? Yes No

Have you ever fainted or blacked out? Yes No

Have you ever had a stroke or heart attack? Yes No

Do you have any phobias i.e., fear of heights, etc.? Yes No

Do you have any significant weakness in your grip? Yes No

**ASSUMPTION OF RISK AGREEMENT
AND
LIABILITY RELEASE**

I/We, _____ am/are registered to participate in Road Scholar, Inc. program number #12294-_____ (“the Program”) which begins on Sunday, _____ and is hosted by Pacific Islands Institute, Ltd. (“the Host Institutions”).

I have read and understand the description of the program published in the Road Scholar catalog as well as the material sent to me by the Host Institutions describing the Program. I have been afforded the opportunity to seek additional information regarding the risks inherent in the Program. I acknowledge and I am aware that the Program involves hazards and risks which I am prepared to accept. In addition, following appropriate medical consultation with my personal physician, I have determined that my health is adequate to participate safely in the Program.

Accordingly, as part of my decision to enroll, I hereby release Road Scholar, Inc. and the Host Institutions (including all of their personnel, agents, affiliates, staff and directors) from any and all liabilities to me with respect to injury, sickness, disease, loss or damage. This release does not apply to liabilities arising from gross negligence or wanton or reckless conduct by Road Scholar, Inc. or the Host Institutions. Apart from that exception, this release applies to any and all liabilities to me or my estate of any type or description, whether arising from ordinary negligence or otherwise, and whether involving fees and expenses of any kind. In the event that some other person or entity seeks compensation for these released liabilities, I or my estate will defend, indemnify and hold harmless Road Scholar, Inc. and the Host Institutions (including all of their personnel, agents, affiliates, staff and directors) for all costs and expenses incurred in response to that claim, including attorneys fees. This release is to be interpreted and enforced under Massachusetts law.

Signature of Participant

Date Signed

Signature of Witness

Signature of Traveling Companion

Signature of Witness

Aloha,

A great number of Road Scholar participants who have come to Hawai'i have told us that they are interested in visiting two major sites - the USS Arizona Memorial and the Polynesian Cultural Center. Some of Pacific Islands Institute's Road Scholar programs, this program included, visit the USS Arizona Memorial as part of the program; however, we do not visit the Polynesian Cultural Center.

As a convenience to those of you interested, we are offering the Polynesian Cultural Center (PCC) as an optional free time activity at a specially-arranged reduced admission rate. Please consider the following as you decide whether you would like to visit PCC:

1. PCC is a large cultural theme park geared towards mass-market tourism and is open to the general public. Entertainment is its focus, not education. If you decide to go, expect to be entertained and not to learn at the expected standard Road Scholar level.
2. PCC is located in Lā'ie, about 1.5 hours drive from Waikīkī. Transfers are included (please note that the transportation will carry both Road Scholar participants and other visitors). The drive from Waikīkī is beautiful, crossing the mountain range and along the windward coast.
3. The bus departs Waikīkī at approximately 12:00 noon and returns at approximately 10:00 - 10:30 pm so it is a long day. The Waikīkī departure point is near your hotel.
4. PCC is large and contains many different villages of the South Pacific (Samoa, Tonga, New Zealand, Tahiti, etc.), an IMAX theater, scheduled performances and activities, etc.; you will most likely not have time to do everything. For more details, visit www.polynesia.com.
5. PCC sells different packages. We offer one of the packages which we believe to be the best value (includes admission, lū'au buffet dinner, show, and transportation.) Your Road Scholar program does not include a lū'au.
6. Neither Road Scholar nor Pacific Islands Institute control or guide the programming or staff at the Polynesian Cultural Center - it is an independent operation.
7. PCC is owned and operated by the Church of Jesus Christ of Latter Day Saints. The staff largely consists of students from the South Pacific attending nearby Brigham Young University. We have not experienced any promotion of the church as part of the experience.

While we do feel that the Polynesian Cultural Center has something to offer – exposing you to some degree to the different major Polynesian cultural groups, it is but one of many options for your free time. Visit Hawai'i's official tourism website at www.gohawaii.com for other optional activities.

We look forward to your arrival and to sharing a great program with you.

Best Regards and Aloha,

A handwritten signature in black ink that reads "Andrew A. Lockwood". The signature is written in a cursive, flowing style.

Andrew A. Lockwood
Pacific Islands Institute
Road Scholar Director

**PARADISE ADVENTURE
FROM MOUNTAINS TO SEA
Program #12294 - _____**

OPTIONAL FREETIME ACTIVITY REGISTRATION (PURCHASE) FORM
(This optional activity is available for the day you have a free on O`ahu)

ALI`I LŪ`AU PACKAGE

The Polynesian Cultural Center celebrates traditional Polynesian culture, and gives you a unique opportunity to immerse yourself in the lifestyles, habitats, entertainment and hospitality of these islands in a beautifully landscaped 42-acre setting. Visit www.polynesia.com for detailed information.

The *Ali`i Lū`au* Package offers*:

- Visits to seven Polynesian villages
- Canoe rides
- Tram tour of Lā`ie town
- “Rainbows of Paradise” Pageant of the Long Canoes
- Admission to IMAX theater
- Ali`i Lū`au buffet dinner/show (seating at 5pm)
- Fresh flower lei
- Preferred seating at the “Ha” night show extravaganza
- Round Trip Transportation from Waikīkī on an air-conditioned motor coach (non-exclusive – there will be other non-Road Scholar passengers aboard)

*Please note that due to the large number of activities available, you won’t have time to do everything. Retail price for this package including standard transportation is \$125.00.

<u>NAME</u>	<u>DISCOUNTED ROAD SCHOLAR COST</u>
1. _____	\$115.00 (includes tax)
2. _____	\$ _____. ____
TOTAL:	\$ _____. ____

Please fill out this form and return it with payment to the address below no later than 4 weeks prior to the program start date. Checks should be made out to *Pacific Islands Institute* for the total amount due (Canadian participants – please note that the amount is in U.S. Dollars). Please note that the amount is non-refundable within 24 hours of the date of your visit to the Polynesian Cultural Center.

Remit payment to: PII Road Scholar Programs
c/o Pacific Islands Institute
3566 Harding Avenue, Suite 202
Honolulu, HI 96816