

## Trip Application

Please print your name and information carefully as this information is needed for your hotel reservations. Your airline information is mandatory.

**Remember....a Passport is necessary if you are coming from abroad!**

**DELRAY, FL: Honoring & Healing the Goddess Within!**

**February 9–12, 2012**

**Led by: Shanti Gilbert**

**Sponsored by: Journeys of the Spirit®**

**727.421.0849 phone**

**727.344.1339 fax**

**<http://www.journeysofthespirit.com/trips/florida-goddess-retreat>**

Your full name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (       ) \_\_\_\_\_ Office Phone (       ) \_\_\_\_\_

E-mail \_\_\_\_\_ Cell Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Marital Status \_\_\_\_\_

Sex \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Citizenship \_\_\_\_\_

Birth date  
(month/day/year) \_\_\_\_\_ Birthplace \_\_\_\_\_

I am willing to share a double room (yes or no)? \_\_\_\_\_

If yes, I choose to room with: \_\_\_\_\_

Any dietary restrictions or preferences? \_\_\_\_\_

How did you hear about this trip? (We like to give credit where credit is due!)

\_\_\_\_\_

In case of Emergency contact: \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Relationship \_\_\_\_\_

**Your airline, flight numbers and departure and arrival times:**

***Into Ft Lauderdale:***

Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Out of Ft Lauderdale:***

Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cost of retreat: \_\_\_\_\_

Subtract your deposit if you already sent it in: \_\_\_\_\_

Your balance is due by **January 1st, 2012** \_\_\_\_\_

**Thank you!**