



Please mail or fax this Agreement to:
Frontier Travel Camp, Inc.
1145 99th Street, Bay Harbor Islands, FL 33154
Phone: 866.750.CAMP (2267)

PERSONAL INFORMATION

Traveler Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____
Mother's Name: _____
Father's Name: _____
Alternate Address: _____
City: _____ State: _____ Zip: _____

Date of Birth: _____ - _____ - _____
Home Telephone: () _____
Work Telephone: () _____
Traveler's Cell: () _____
Mother's Cell: () _____
Father's Cell: () _____
Other: () _____
T-Shirt Size: _____

2023 MID-WINTER CRUISE

6 Nights: Royal Caribbean's Harmony of the Seas (January 15-21, 2023)

\$3,500

Single Supplement available ADD \$1,300 inside Cabin, ADD \$2300 for Balcony Cabin.

Paid: _____

Total Due: _____

AGREEMENT STATEMENT

I, _____, hereby enroll as a member of Frontier Travel Camp, Inc. By completing this form you have agreed to have a great trip with Frontier Travel Camp. The enrollment deadline and final payment for the cruise is October 1st, 2022. Spring Trip deadline is December 31st, 2022. Summer Tours deadline is April 15th, 2023. Alternative arrangements may be made by request with Scott Fineman. In the event that the tour needs to be postponed due to COVID-19 a credit will be given for the tuition less irrecoverable expenses. No credits will be given within 30 days of departure or to those who must withdraw while on tour for any reason (i.e. medical, family, political, personal, etc) except for last minute postponement of the complete tour at the discretion of Frontier Travel Camp. All traveler's and staff must be vaccinated and tested for COVID-19 using a PCR test within 72 hours of departure. Vaccination documentation will be due June 1st, 2023. Anyone who tests positive for COVID-19 within 72 hours of tour departure must withdraw from the tour at their own expense. Once airline tickets are purchased in the name of the traveler, that ticket will be owned fully by the traveler. The value of that ticket will be deducted from tuition and any future credit provided by Frontier Travel Camp. **Traveler's Insurance for "cancel for any reason" coverage including medical is always recommended.**

I, _____, acknowledge that Frontier Travel Camp, Inc. and/or its employees, has acted on behalf of the undersigned in making arrangements for applicant's participation in its program for transportation in connection therein.

Traveler's Signature

Date

Parent's Signature

Date