



Springtime by the Ocean in Myrtle Beach!

May 11-15, 2026

INSTRUCTIONS: Please complete the information and send to Jeanie's Journeys with your payment as soon as possible. One Registration Form per person is required to be confirmed on the tour. By submitting this registration form, you are agreeing to Jeanie's Journeys terms & conditions. See website for details. Tour is first come, first served!

PLEASE PRINT CLEARLY. FILL IN ALL BLANKS. If does not apply please enter N/A. Please fill out one form for each person.

Where did you hear about this tour?(Check One)

Online_____ Community Center_____ Which Community center? _____

Jeanie's Journeys Catalog:_____ Other:_____ Previously traveled with us_____

Are you active or Retired Military: Yes_____ No_____

NAME:_____

Full Legal Name

First

Middle

Last

PREFERRED NAME:_____

For Nametag

BIRTHDAY:_____

Required

ADDRESS:_____

Street

Apt Number

City

State

Zip

MOBILE PHONE:_____ EMAIL:_____

Frequent Flyer, TSA PreCheck, Airline FF#, Etc: _____

ROOMMATE(if Applicable):_____

First

Last

OCCUPANCY:

\$1,998 Double _____ \$2,298 Single _____

DEPOSIT: \$300 Per Person

FINAL PAYMENT DATE: April 2, 2026

SLEEPING ARRANGEMENTS: 1 BED:_____ 2 BEDS:_____ DOESN'T MATTER:_____

TRAVEL INSURANCE: Price per person DUE AT BOOKING

I would like TRAVEL INSURANCE at per person: Yes_____ No_____

\$164 Double _____ \$188 Single _____

Travel insurance is Non-Refundable. Cancel for Medical Reason ONLY. If nothing is checked you will NOT be enrolled in insurance.

PLEASE TURN PAGE TO FILL OUT COMPLETELY

Notes to Organizer (food allergies, handicap room, etc): _____

EMERGENCY CONTACT: Name _____ Relationship _____
Phone Number _____



These tours are more strenuous in their Difficulty Level and require **1-4 plus miles of walking per day**. Travelers who require the use of a cane, walker or wheelchair or are in need of physical assistance to walk are encouraged to sign up for our **Level ONE Difficulty Tours**.

Initial: ____ I understand the tour difficulty rating described for this tour and am able to perform the level of activity indicated (Walking 3-5 miles per day) and am fully capable of walking this distance WITHOUT assistance.

____ **I have read the above statement* Acknowledgment Right to Refuse:** Although everyone is welcome on a Jeanie's Journeys tour, sometimes certain tours are not a good fit for some travelers. Participation on a tour is subject to Jeanie's Journeys' reasonable discretion to promote safety, comfort, and compliance with law. When meeting at a departure point for a tour, if it is determined that a traveler is unable to meet the stated physical requirements of the tour, Jeanie's Journeys may cancel that traveler's participation before departure; in such case, no refund will be made. Jeanie's Journeys also reserves the right to terminate the tour at any time, of any person who is abusive, threatening, intoxicated, engaging in illegal activity, or otherwise disrupting or materially interfering with the tour, staff, or other travelers. If asked to leave a tour, the traveler must depart the tour promptly and will be responsible for all resulting costs, including transportation, accommodation, and other expenses; no refunds will be provided for unused services. Decisions under this paragraph may be made by Jeanie's Journeys' representatives in their reasonable discretion and are final. By initialing, you agree that: you have carefully read, fully understand and agree to all of the terms and conditions described. **Any registration not initialed will not be accepted.**

PAYMENT: Please check one(Check preferred): CHECK:_____ CREDIT CARD:_____
Number:_____ Exp Date:_____ CVS three (or four if Am Ex) letter code:_____
Total Amount Enclosed:_____

For assistance with reservations:
please call Jeanie at 612-229-5276
Or email Jeanie at Jeanie@Jeanies-Journeys.com Jeanie's Journeys 954 Wakefield Ave Saint Paul, MN 55106
Travelers Needing Special Assistance
Jeanie's Journeys cannot provide special individual assistance to tour members with special needs for walking, dining, airport assistance or other routine activities. Jeanie's Journeys will make reasonable efforts to accommodate the special needs of tour participants. However, you will be required to have a companion who is capable and totally responsible for providing assistance for you while traveling. You must report any disability requiring special assistance at time of sign up. See flyer for more details

OFFICE USE ONLY

Deposit Date: Payments Made:	Travel Insurance Policy:	
	Date Purchased:	Tour Cost:
	Travel Insurance Claim Number:	
	Date Canceled:	Cancellation Method: Writing Call Email
	Refunded: Yes No Date Refunded:	
	Amount Refunded:	Refund Method:

NOTES: