

# Hawaii Health Getaway Reservation Form

## Kauai Retreat

Trip Date: April 26 – May 3, 2013

Couples, please fill out a separate reservation form for each participant. This form may be copied.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### **Payment:**

(Circle one)	Early Registration by Feb. 26, 2013	Registration Fee	Private Room
Retreat fee	\$2,100 or \$2,000 for past participants	\$2,200	Additional \$420

Van service: \$200 per person (pickup and drop-off at the airport as well as transportation to all activities)

Total Fees: \_\_\_\_\_

A non-refundable \$500 deposit is necessary to confirm your reservation. Full payment is due 60 days prior to departure.

**Cancellations:** If we must cancel a trip due to unexpected events, an immediate full refund (including deposit) will be made and our financial liability will not include additional expenses incurred by applicants preparing for the trip.

**Insurance:** We recommend that you protect yourself with short-term baggage, accident/life and trip cancellation insurance available through any travel agent for a nominal premium.

**Liability Release:** Hawaii Health Getaway is designed to offer a safe, healthy vacation. There are however some risks or dangers associated with any trip, including but not limited to air, bus, car or watercraft accidents, swimming or diving accidents, illness or acts of nature, man or God.

I will participate in the Hawaii Health Getaway at my own risk and hold all staff and related parties harmless from, and defend them against any and all demands, liabilities, suits, causes of action and claims of any kind which may arise in any connection with my participation.

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

### **Copy and Mail Reservation Form and Deposit to:**

Hawaii Health Getaway  
RR2, Box 3902  
Pahoa, Hawaii 96778  
(808) 651-7988  
[www.HawaiiHealthGetaway.com](http://www.HawaiiHealthGetaway.com)