INTERNATIONAL STUDENT TOURS
GRADWEEK

NAME CHANGE REQUEST FORM

5080 Robert J. Mathews Parkway, El Dorado Hills CA, 95762 • www.gradweek.com • E-Mail info@istours.com

Before you sell your trip, please be aware that your name change request must first be approved. Please complete form and e-mail back to the address listed above (mail not recommend). Once received, a Customer Service Agent will inform you whether or not your request has been approved.

Name changes will not be permitted within 2 weeks of your travel date – No Exceptions!

ORIGINAL TRAVELER'S INFORMATION (please print legibly):

Name:	Traveler ID:	Group Name:

Male ☐ Female ☐	Traveler Contact No:	Parent Contact No:

Per the Tour Participant Agreement you originally signed, Name Changes are permitted depending on the air carrier and on an approval basis. If the name change is approved and the name change does not interfere with rooming, the name change fees are as follows:

$25.00 change fee, if changed BEFORE March 1st / $100.00 PLUS any additional airline fees if change occurs March 1st & After

I wish to transfer my account to the individual named below. I also understand that it is my responsibility to collect any funds due to me from the new person indicated below. Additionally, I acknowledge that the transfer fee outlined above must accompany the request form and will be added to the existing account. I understand that if the name change causes conflicts in the rooming arrangements, GradWeek may **not** be able to approve the Name Change. If this name change creates a Co-Ed situation with rooming, and all parties agree to the change, a single "Co-Ed" Permission Form must be completed with all parent signatures must also be submitted with this form (form available at www.gradweek.com). If the Optional Trip Insurance was purchased, it cannot be transferred to the new traveler nor can it be removed so will be non-refundable.

*** Signature of Original Traveler *** / Date	***Parent Signature of Original Traveler*** / Date

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NEW TRAVELER'S REGISTRATION INFORMATION (Please print legibly and completely with LEGAL Name): Male ☐ Female ☐

First:	Middle:	Last:

*** If traveling to Mexico or Bahamas, as listed on Valid Passport. If traveling to Hawaii, as listed on your Driver's License or Government issued I.D. Card ***

Mailing Address:	City:	State:	Zip:

D.O.B.: / /	Traveler Email Address:	Parent Email Address:

Group Name:	Traveler Contact No:	Parent Contact No:

** I have read, understand and agree to the Tour Participant Agreement on the GradWeek Brochure. I understand that I am required to have the specified **Travel Documents** in order to travel to Mexico or to the Bahamas. **Non U.S. citizens** need to contact either the Mexican Consulate or the Bahamas Consulate to confirm entry documentation requirements. I also understand it is my responsibility to reimburse the original participant directly for any monies they paid toward the trip and that any remaining balance is due in the office by March 1st, or prior to trip departure, whichever comes first. I understand the above fees are applicable depending on the date of the transfer. I also understand I am responsible for any remaining balance on this account and/or any additional fees (i.e., occupancy fees for rooming, NSF fees, etc.) and must be paid prior to departure. **

*** Signature of New Traveler *** / Date	***Parent Signature of New Traveler*** / Date

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FORM OF PAYMENT: ☐ Check or Money Order Enclosed $ _____ **OR** Charge Credit Card: Disc ☐ Visa ☐ MC ☐ Amex ☐

Cardholder Name:	Card Holder's Signature:	$ Amount Authorized:

Credit Card Number:	Exp Date:	CVC#:	C/C Billing ZIP:
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