

Elders' Inc.
Multiple Day Travel Agreement

This is an agreement related to travel to [place] _____ on [date] _____.

Name: [print name] _____

Relationship: Squaxin Member Elder Elder's Spouse Elder's Caregiver Elder's Guest

Address: _____

Phone No.: Home _____ Cell _____ E-Mail _____

Deposit amount required: \$ _____ for [purpose] _____

Driver's License/or other ID No. _____ Expiration Date _____

Copy of Driver's License attached

Automobile insurance:

Copy of Car Insurance Document Attached (If driver of a car)

Passport No.: (if required) _____ Expiration Date _____

Copy of Passport attached (If not attached explain reason)

Contact Person in case of illness or accident

Name: [print name] _____

Relationship: Spouse Son or Daughter Brother or Sister Other

Address: _____

Phone No.: Home _____ Cell _____ E-Mail _____

Promise to repay Elders' Inc.

I understand that I am making a commitment to travel and, as a result, Elders' Inc. will in turn be making financial commitments for my benefit. I agree to notify the Elders' Coordinator as soon as practicable upon learning that I cannot travel. I agree to reimburse Elders' Inc. for any expense it incurs as a result of my commitment to travel if I cancel or otherwise do not travel without a valid excuse. I agree to do so within three months of the first date of the travel. A valid excuse means a significant event such as my serious illness, the serious illness of someone who requires my caretaking, or the death of an immediate family member (a parent, spouse, child, grandparent, sister, brother, grandchild, aunt, uncle or 1st cousin). If Elders' Inc. does not incur costs equal to my deposit it will refund the balance of the deposit.

Signature

Date Signed