



explore your global food system...

To reserve your space on the trip of your choice:

1. Complete all required fields of the registration form
2. Send registration form to: Attn: TOURS, Food First, 398 60th St., Oakland CA 94618. You may also fax both sides to (510) 654-4551 or send by email to [foodsovtours@foodfirst.org](mailto:foodsovtours@foodfirst.org)
3. Mail a check payable to Food First/Institute for Food & Development Policy of a non-refundable deposit of \$400\*.

*\*NOTE: A \$400 deposit is required for all tours. Deposits are non-refundable. However, if you cannot cancel at least 30 days before the departure date of your registered tour, you may transfer your deposit to another Food Sovereignty Tour within one year. If Food Sovereignty Tours cancels a delegation for any reason, all deposits and payments are refunded in full. Full payment is due 45 days prior to departure.*

Tour Title \_\_\_\_\_ Departure Date \_\_\_/\_\_\_/\_\_\_\_

Name \_\_\_\_\_ (as it appears on your passport)

Name \_\_\_\_\_ (as you prefer to be called)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

Place of Birth \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ (If retired, please state from what field)

Ethnic Background (optional) \_\_\_\_\_ Gender \_\_\_\_\_

**Passport Information:**

I am a citizen of \_\_\_\_\_

Passport Number \_\_\_\_\_

State Where Issued \_\_\_\_\_ Date of Issue \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Expiration \_\_\_\_/\_\_\_\_/\_\_\_\_

**Person to contact in case of emergency:**

Name \_\_\_\_\_

Relation \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

**Language abilities other than English:** (Please indicate whether basic, intermediate, conversational or fluent)

Spanish \_\_\_\_\_ French/Creole \_\_\_\_\_ Portuguese \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_

**Accommodations:** Tour price is for double occupancy (which is not always guaranteed). Single room accommodations require an additional fee of \$300. Please check availability by emailing us. Preferences:

Non-Smoking\_\_\_\_ Smoking\_\_\_\_ Do you want a single room? Yes No

If No: Do you have a roommate? Yes No

If Yes: Name \_\_\_\_\_(We will assign a roommate, if available.) Gender preference: \_\_\_\_\_

**How did you hear about this tour?**

- Website or Search Engine
- Email/Listserv
- Article
- Print Advertisement
- Online Advertisement
- From a Friend
- Other

Please specify (friend's name, publication or website) \_\_\_\_\_

Promotional Code (If Applicable) \_\_\_\_\_

(Please answer all questions. Attach additional pages, if necessary)

Why do you want to go to this destination? What do you expect to gain?

Please state the ways in which your work or studies relate to the issues pertaining to this Food Sovereignty Tour:

How will you apply your learning experience when you return home?

At times we are able to arrange private meetings for travelers, in addition to the general itinerary of the group. Is there a particular person or organization you would like to meet?

**Payment:**

Deposit paid by:  Check enclosed payable to Food First  Credit Card:

Type\_\_\_\_\_ Account Number\_\_\_\_\_ Expiration\_\_\_\_\_

Amount: \$\_\_\_\_\_ Print name as it appears on card\_\_\_\_\_

**Please return this completed form by mail, fax or e-mail to:**

Food Sovereignty Tours/Food First, 398 60<sup>th</sup> Street, Oakland, CA 94608

Fax: (510) 654-4551 • e-mail: [foodsovtours@foodfirst.org](mailto:foodsovtours@foodfirst.org)