

# PORTUGAL



To register online, visit:  
[www.stardestinations.com/unloll](http://www.stardestinations.com/unloll)

Travel arrangements  
provided by



## September 21-28, 2024 (with post-tour: September 21-October 2, 2024)

### PASSENGER INFORMATION (1st Traveler)

Full name must be exactly as it appears on your passport or passport application.  
Passport information may be sent later if you have yet to obtain a passport.

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

Middle Name(s): \_\_\_\_\_

Last Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender (circle one): M F

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

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

Preferred Phone: \_\_\_\_\_

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

Passport #: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month / day / year

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month / day / year

Dietary Needs: \_\_\_\_\_

Additional Special Requests/Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact's Phone: \_\_\_\_\_

### PASSENGER INFORMATION (2nd Traveler)

Full name must be exactly as it appears on your passport or passport application.  
Passport information may be sent later if you have yet to obtain a passport.

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

Middle Name(s): \_\_\_\_\_

Last Name(s): \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Gender (circle one): M F

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

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

Preferred Phone: \_\_\_\_\_

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

Passport #: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month / day / year

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month / day / year

Dietary Needs: \_\_\_\_\_

Additional Special Requests/Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact's Phone: \_\_\_\_\_

Sleeping Preference (circle one): Two Beds One Bed

Roommate (name): \_\_\_\_\_

Solo Travelers: Would you like to be paired with another solo traveler  
in a double occupancy room, if possible?  Yes  No

Will you be joining the Azores post-tour?  Yes  No

**\* A Travel Protection Plan may be purchased any time  
before or with final payment to Star Destinations \***

University of Nebraska OLLI recommends all travelers purchase a  
Travel Protection Plan. For your convenience, we offer a Travel  
Protection Plan provided by Travelex Insurance Services.

Yes, I would like to purchase the offered plan.  
See the included Travelex Insurance Services flyer for pricing.  
(Payment may be sent with your deposit or with final payment to Star Destinations)

No, I decline the offered plan.

Tour Cost\*: per person, Double: \$5,245 Single: \$5,839  
with post-tour: \$7,670 \$8,654

(Air allowance of \$1,800; additional \$300 allowance for post-tour)  
\*Tour cost subject to 3% credit card transaction fee

Travel Insurance is underwritten by Zurich American Insurance Company, (NAIC #16535). Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. To view state specific fraud warnings, visit: <https://www.travelexinsurance.com/company/fraud-warning>. Travelex Insurance Services Inc. ("Travelex Insurance") maintains an updated list of alerts and financial defaults on its website available at <https://www.travelexinsurance.com/customer-service/travel-alerts/travel-supplier>.

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PLEASE TURN OVER FOR SIGNATURE