



## BLUE BEE ODYSSEYS Registration Form

Odyssey Name:

Odyssey Date:

Name(as it appears on your passport):

Street Address:

City:

State:

Zip:

Country:

Date of Birth:

Phone:

Email:

### **Passport Information**

Passport Number:

Nationality:

Date of Issue:

Date of Expiration:

Place of Issue:

### **Emergency Contact Information**

Name:

Phone:

Email:

**Dietary Preferences** Do you have special dietary requirements, allergies, and/or preferences that you would like us to know about for this journey?

**Health Information** Do you have any health limitations that may affect your ability (or the ability of others) to safely participate in this journey?

*We travel, initially, to lose ourselves; and we travel next to find ourselves. We travel to open our hearts and eyes and learn more about the world than our newspapers accommodate.* Pico Ayer

**Briefly, tell us why you are drawn to this odyssey. What is your intention?**