

BUS EXCURSION TO OAKLAND MUSEUM OF CALIFORNIA

SATURDAY, FEBRUARY 1, 2020

REGISTRATION FORM

Name:		
(PLEASE L	LIST ALL NAMES OF TRAVELERS YOU ARE REGISTERING	5)
Street Address:	City:	Zip:
Phone: Day:	Evening/Weekend:	
Cell phone:	Anyone under 21?	
E-mail: Please writ		(We often serve wine on return trip , and this is an ABC requirement.)
HELP FAM GO GREEN (GO PAPERLESS) BY PROVIDING YOUR EMAIL ADDRESS FOR ALL CORRESPONDENCE RELATING TO THIS TRIP.		
Total payment for	o Art Museum at \$125 each Non-Me travelers for a total of \$ of travelers)	
Payment method:		
Check made payable to the Fresno Ar	t Museum Credit Card: 🗖 Visa 🗖 Mas	terCard 🗖 AMEX 🗖 Discover
Card No	Exp. Date:	CVV Code
	Billing Zip (if different t	
Signature		
FULL PAYMENT IS DUE BY 5	PM THURSDAY, JANUARY 23, 2020 AND IS N	ON-REFUNDABLE.

CANCELLATION POLICY

If you are unable to attend, you may fill your seat with another traveler at no additional charge if FAM is notified of the name of the new traveler by 1:00 pm on Friday, January 31, 2020. If you are unable to find a replacement, the entire payment will be considered a tax deductible contribution to the Fresno Art Museum.

If the trip is postponed, delayed, extended, rescheduled, or cancelled as a result of: an Act of Nature, severe weather (including, but not limited to hurricanes, tornadoes, or other severe wind or precipitation), earthquake, fire, flood, medical emergency, labor unrest or strike, embargo or boycott, terrorism, war, insurrection, crime, automobile accident (unless caused solely by The Museum or its agents), mechanical failure, severe traffic, cyber attack or cyber crime, failure of the public electrical grid, failure of the public Internet, failure of the public payments system, closure of any museum or other destination for any reason, or any similar type of circumstance beyond the reasonable control of The Museum (a "Force Majeure Event"), then The Museum will make every effort to reschedule the trip on an alternate date that the plurality of passengers agree upon. If a passenger is unable to attend or chooses not to attend on the alternate date they may apply their payment to a future trip or to a Museum Membership (which may be a new membership, an upgrade, or a renewal). No refunds will be available for a Force Majeure Event. If the trip cannot be completed because of a Force Majeure Event, The Museum will make every effort to find an alternate route or alternate transportation, as applicable, back to Fresno and the Museum will not be responsible for covering accommodations or for any other costs or losses caused by a delay in returning home that result from a Force Majeure Event. Your signature on the reverse confirms your understanding of these policies.

PLEASE COMPLETE EMERGENCY CONTACT INFORMATION & SIGN ON REVERSE.

Bus Excursion to Oakland Museum of California Saturday, February 1, 2020

EMERGENCY CONTACT INFORMATION

Please complete this form for each traveler. Couples can submit one form for both, but both must date and sign below.

Your name	
Traveling companion's name (if applicable):	
Your cell phone number:	
Traveling companion's cell number (if applicable):	
Emergency Contact (someone who will <u>NOT</u> be travel	
Name(s)	
Relationship:	
Phone: Home Cel	
Other:	
Is there any medical condition our staff should be awa □ No □ Yes If yes, please explain:	are of in the case of an emergency?
Please note: It is very important that you provide cell numbers f not return to the bus at the designated times OR in the unlikely e use the number to reach you if there is a change in the itinerary o time designated for departure.	or you and any traveling companions in the event you do event that there is a change in the itinerary. We will only or to contact you if you do not return to the bus by the
Waiver of Liability: I agree to release and indemnify the Fresno , trustees, agents, and successors (the "Releasees") from and for losses, and costs (the "Claims") related to or arising from any inj injury or damage be physical, emotional, financial, or any other k agree not to sue any of the Releasees on any of such Claims.	Art Museum, and its officers, employees, volunteers, any and all liability, claims, causes of action, damages, ury or damage to my person or property, whether the ind, suffered on or otherwise related to this trip, and I
	Date signed
Your signature	
	Date signed
Traveling companions's signature, if applicable	
You may email, fax, mail, or drop off your completed at 2233 North First Street, Fr	
Your registration form must be received no later Fax number is 559.441.4227. E-mail is sus For questions, please call Susan	san@fresnoartmuseum.org.
Please note that you will receive confirmation	of your reconvotion a final itinerary

Please note that you will receive confirmation of your reservation, a final itinerary, and other details via email 5 to 7 calendar days before the trip OR by US mail the week of the trip.