

# BERMUDA BOUND REGISTRATION FOR INFORMATION FORM

NAME OF SCHOOL: \_\_\_\_\_

TYPE OF SCHOOL: \_\_\_\_\_

ADDRESS:(MAILING) \_\_\_\_\_ (STREET) \_\_\_\_\_

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CONTACT PERSON: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

TIME OF YEAR YOU WISH TO PLAN FOR YOUR TRIP TO BERMUDA: \_\_\_\_\_

SPECIFIC DATES: 1. \_\_\_\_\_

2. \_\_\_\_\_

HOW MANY TRAVELORS DO YOU ANTICIPATE IN YOUR GROUP?

STUDENTS: \_\_\_\_\_

STAFF: \_\_\_\_\_

**TYPE OF EDUCATIONAL EXPERIENCE YOU ARE LOOKING FOR:** (FOR EXAMPLE: MOSTLY SCIENTIFIC RESEARCH; MIX OF RESEARCH AND CULTURAL; CULTURAL ONLY; MAINLY SNORKELING, BEACHES AND SITES OF INTEREST ETC) **ITINERARIES ARE CUSTOMIZED FOR EACH SCHOOL**

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**Return to:**  
SARAH NORFLEET  
BERMUDA BOUND  
SUITE 212  
12 CHURCH STREET  
HAMILTON HM 11, BERMUDA

**Or Register online at** [www.bermudabound1.com](http://www.bermudabound1.com)  
Phone: 441-799-0953  
Fax: 441-292-9174  
Email: [info@bermudabound1.com](mailto:info@bermudabound1.com)