



## NAME CHANGE REQUEST FORM

### REQUIREMENTS

A name change is possible at the discretion of our suppliers. The responsibility to find a suitable replacement is yours alone. You cannot complete a name change with an existing traveler or anyone previously registered for this trip. The replacement will assume all details of the traveler's package [eg. price, supplements, etc.].

#### A NAME CHANGE REQUEST MUST MEET THE FOLLOWING REQUIREMENTS:

- ☒ To request a name change your account must be current and up to date.
- ☒ Completed Name Change Request Form

#### FEES AND RESTRICTIONS:

- The replacement is responsible for directly paying the current traveler the agreed upon funds to take over the package. GradCity does not take part in the exchange of fund between parties. **The current traveler will not be refunded by GradCity.**
- Fees may apply with external suppliers depending on the time name change request is placed.

### TRAVELER

SCHOOL OR GROUP NAME: \_\_\_\_\_

CUSTOMER ID: \_\_\_\_\_ TRAVELER NAME: \_\_\_\_\_

#### IF YOU ARE UNDER THE AGE OF 18 YEARS, THIS FORM MUST BE SIGNED BY A PARENT/GUARDIAN

*I, the above stated traveler, have decided not to travel on the GradCity package I had reserved. I have found a replacement stated below.  
I understand that I will receive a refund for all payments made to GradCity less the name change fee.*

\_\_\_\_\_  
Traveler Signature                      Parent/Guardian Signature (if under 18)                      Date

### REPLACEMENT

SCHOOL OR GROUP NAME: \_\_\_\_\_

TRAVELER FULL LEGAL NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

TRAVELER PHONE #: \_\_\_\_\_ TRAVELER D.O.B : \_\_\_\_\_ TRAVELER GENDER: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

PARENT/GUARDIAN EMAIL ADDRESS: \_\_\_\_\_

PARENT/GUARDIAN PHONE #: \_\_\_\_\_

#### IF YOU ARE UNDER THE AGE OF 18 YEARS, THIS FORM MUST BE SIGNED BY A PARENT/GUARDIAN

*I, the above stated replacement have decided to travel on the GradCity package reserved by the traveler stated above. I understand that I will take responsibility to make all necessary payments in place of the traveler.*

\_\_\_\_\_  
Traveler Signature                      Parent/Guardian Signature (if under 18)                      Date

EMAIL COMPLETED NAME CHANGE REQUEST FORM TO [CUSTOMERCARE@GRADCITY.COM](mailto:CUSTOMERCARE@GRADCITY.COM)