VIA MATT TRAVEL LLC | MJ TOURS

Brazil: From Rio to Iguazu Falls

APRIL 4-15, 2027 / TRAVELER & PASSPORT INFORMATION

Complete all required fields. Use your passport exactly for names, date of birth and passport details. Enter “none” where appropriate. A clear passport photo-page copy must accompany this form.

01 / TRAVELER IDENTITY

First / given name(s) *

Middle name(s), or none *

Last / family name *

Date of birth (MM/DD/YYYY) *

Sex as shown on passport *

Country of birth *

Citizenship / nationality *

Other citizenship, if any

Country of residence *

02 / PASSPORT USED FOR THIS TRIP

Passport number *

Issuing country *

Date of issue (MM/DD/YYYY) *

Expiration date (MM/DD/YYYY) *

03 / CONTACT INFORMATION

Street address / apartment *

City *

State / province *

ZIP / postal code *

Mobile phone with country code *

Email address *

Preferred name

Alternate phone

Submit all five pages and passport photo-page copy to info@viamatt.com.

Questions / submission assistance: (201) 500-5043

Brazil: From Rio to Iguazu Falls

APRIL 4-15, 2027 / ROOM, AIRLINE & TRAVEL PREFERENCES

Traveler full name (repeat to identify this page)

04 / ROOM SELECTION / PER PERSON

- Double occupancy - USD 5,950
- Single occupancy - USD 7,200

Requested roommate (required for double; write TBD if not arranged)

Bed preference (request only)

- Two separate beds
- One shared bed
- No preference

05 / FLIGHT ARRANGEMENTS

- Planned group flights from / to Newark
- Request different arrangements

Flight or travel-date request, if any (subject to confirmation and possible additional cost)

06 / AIRLINE MILEAGE / FREQUENT-FLYER ACCOUNTS / OPTIONAL

Airline / program (e.g., United MileagePlus)

Membership number

Additional airline / program

Membership number

Seat preference (request only; availability and airline rules apply)

- Aisle
- Window
- No preference

Requested seating companion / other seating request

Room, seat and mileage-credit requests depend on hotel and airline availability and rules. The organizers will confirm any requested changes before arrangements are finalized.

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APRIL 4-15, 2027 / TRUSTED TRAVELER, ASSISTANCE & EMERGENCY CONTACTS

Traveler full name (repeat to identify this page)

07 / TSA PRECHECK / GLOBAL ENTRY / OPTIONAL

Program (TSA PreCheck, Global Entry or other)

Known Traveler Number / PASSID

Membership expiration date (if known)

DHS Redress Number (if issued; optional)

For Global Entry, use your PASSID as the Known Traveler Number. This is different from a DHS Redress Number. Your name and birth date must match the reservation and program records.

08 / ASSISTANCE & DIETARY REQUESTS

Describe assistance needed for flights, hotels, walking tours or the boat excursion. Include only information relevant to arranging your travel. Requests require confirmation.

Mobility, accessibility or other travel assistance (write none if not needed) *

Dietary restrictions / food allergies / meal requests (write none if not needed) *

09 / EMERGENCY CONTACT / SOMEONE NOT TRAVELING WITH YOU

Full name *

Relationship *

Primary phone with country code *

Alternate phone

Emergency contact email

Brazil: From Rio to Iguazu Falls

APRIL 4-15, 2027 / PAYMENT SCHEDULE & PAYMENT RECORD

Traveler full name (repeat to identify this page)

10 / PAYMENT SCHEDULE / ALL AMOUNTS PER PERSON IN USD

PAYMENT / DUE DATE	DOUBLE	SINGLE
At registration	**$1,500**	**$1,500**
By November 30, 2026	**$1,475**	**$2,100**
By January 15, 2027	**$2,975**	**$3,600**
TOTAL TOUR PRICE	**$5,950**	**$7,200**

By November 30, the total paid reaches 50%: **USD 2,975 double occupancy** or **USD 3,600 single occupancy**. Processing and late-registration fees are additional.

11 / REGISTRATION & PAYMENT TERMS

Registration payment: USD 1,500 per person is required at registration, including a **USD 500 non-transferable deposit, non-refundable except as stated below**. Each reservation will be processed upon receipt of the registration payment.

Organizer cancellation: If the organizing team cancels the trip due to insufficient participants, the deposit is refundable. Credit card processing fees remain non-refundable, including in this circumstance.

Late registration: Registrations received after January 15, 2027 require full payment plus a USD 100 late-registration fee, subject to availability.

Credit cards: Any major credit card may be used. A 3.5% processing fee applies to every credit card transaction and is non-refundable. A USD 1,500 registration payment by card totals **USD 1,552.50**.

EARLY BIRD: $5,850 per person, double occupancy. Register with a $1,500 payment by October 20, 2026. Eligibility is determined at registration; the applicable discount will appear on your final invoice, sent later. The payment table shows regular prices.

12 / PAYMENT RECORD / COMPLETE WHEN PAYMENT IS ARRANGED

Amount remitted, including applicable fees (USD)

Payment date (MM/DD/YYYY)

Payment method / payer name

Receipt or transaction reference

Brazil: From Rio to Iguazu Falls

APRIL 4-15, 2027 / DOCUMENTS, INSURANCE & ACKNOWLEDGMENT

Traveler full name (repeat to identify this page)

13 / REQUIRED WITH REGISTRATION

- ☐ **Clear passport photo / identification-page copy attached.** Include the full page with all details legible.
- ☐ **All five pages completed, including traveler acknowledgment below.**
- ☐ **Registration payment arranged.** See page 4 for amounts, due dates and fees.

14 / ENTRY DOCUMENTS & TRAVEL PREPARATION

Carry your original passport and required visa / entry authorization. **U.S. citizens currently require a Brazilian visa before travel.** Other nationalities must confirm their requirements. Check passport validity and blank pages for your nationality and itinerary, plus any applicable U.S. re-entry documents and minor-travel permissions. Recheck requirements before departure; a passport copy does not replace the original.

Brazil visa / entry authorization status

- ○ Approved
- ○ Pending
- ○ Not yet applied
- ○ Exempt / confirm

Documents pending / citizenship or minor-travel questions for the organizers

15 / TRAVEL INSURANCE / IF PURCHASED

Provider

Policy number

Emergency assistance phone with country code

16 / TRAVELER ACKNOWLEDGMENT

I confirm that my information matches my travel documents and that a passport copy is attached. I have reviewed the payment schedule, deposit and refund exception, late fee and non-refundable credit card fees. I understand that travel and assistance requests require confirmation, and I will provide updated passport or entry-document information if it changes.

Traveler signature / typed acknowledgment (parent or guardian if minor) *

Date (MM/DD/YYYY) *

Entry guidance: travel.state.gov (Brazil) | Trusted traveler guidance: cbp.gov