



Pre - Retreat Intake Form

We want to get to know YOU before you join us on a Truly Italy Retreat! These questions will help us to personalize your week and make you feel at home. Please fill out this intake form and return it: Via email: trulyitalytours@gmail.com | Via Mail: **9099 Falcon Greens Drive, Village of Lakewood, IL 60014**

Travel Style:

When traveling to a new city for the first time, I prefer...

- No plans. I like to wander the streets and sip a coffee at a cafe
- Asking a local what they recommend and hitting the local spots
- Do research and schedule my days and see as much as I can
- Having a tour guide through the new towns throughout the day

My travel experience is...

- None, this is my first trip out of the country
- A little, I've traveled with friends and family but not much solo
- Moderate, I've traveled a lot but it's been years
- Considerable, I take a trip a year

Packing wise, I would say I am...

- A light packer, 1 bag as carry on is all I need
- A moderate packer, I use 1 carry on and 1 checked bag options wisely
- A heavy packer, I like to have all my options and space for souvenirs

I prefer to visit...

- Cafes and markets
- Hidden local spots
- All the big recommended sights and monuments

- Museums and Cathedrals
 - All of the above
 - Other, please specify _____
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My Morning Routine:

My travel (or everyday routine) preference is:

- Early mornings—out the door right after breakfast
- Leisurely mornings

I would say I:

- Am an early riser, I wake up and get going when the sun rises
- Wake up early-ish so I can have a leisurely morning or squeeze in a morning stroll
- Enjoy my sleep...there's no need to wake me for breakfast
- Love to sleep in, especially when I'm on vacation

For my breakfast, I prefer:

- A full spread of options...eggs, cereal, fruit and coffee
- Something healthy and light, cereal and yogurt
- Coffee and toast, just enough to get my to lunch
- Eat breakfast like an Italian, brioche and a coffee

Dietary Restrictions or Concerns:

- I do not have any food allergies or restrictions.
 - I do not drink alcohol or wine.
 - I am (example: gluten-free, vegetarian, vegan, etc)
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(please elaborate, if needed)

- I have allergies to the following foods: _____
(please elaborate, if needed)
- I have an aversion to the following foods:

(please elaborate, if needed)

Physical or Medical Restrictions, or Concerns:

- I do not have any physical limitations, restrictions or concerns.
- I have a physical or medical limitation, restriction or concerns I'd like you to be aware of. (please elaborate below, if you are comfortable sharing)

Expectations

What kind of expectations do you have for this trip?

What would you really like to experience or see happen while in Tuscany? Or what are you most looking forward to?

Any other notes or things you'd like us to know?