

## RELEASE FORMS AND HEALTH HISTORY FORM

Please complete, sign and return the attached forms to *My Secret Vacation* at least fifteen (15) days before your departure to your secret vacation.

The information on these forms will help us provide you with the service you deserve and expect from *My Secret Vacation*. We will provide copies to the Doctors attending to you as well as the Recovery Center you choose to have your secret vacation.

Please forward signed and dated forms to My Secret Vacation, P.O. Box 691092, Houston, Texas, 77269-1092. You may also e-mail ([info@mysecretvacation.biz](mailto:info@mysecretvacation.biz)) or fax (1-888-92-BELLO) forms but hardcopy must follow.