# Reformation Tours Reservation Form

We are delighted that you are joining us! To ensure your place on the tour, please complete this form, using one form per person or per couple, **sign and mail with the deposit of $350 per person, made payable to "Reformation Tours" and a photocopy of the photo page of your passport** (can be sent later) to P.O. Box 854, Belleville, IL 62222. We suggest you make a copy of this form for your records. Thank you.

## Tour Information:

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| **Tour Name:** | Lutherland & Bavaria **Tour Code:** RDM18 |
| **Tour Host:** | Pastor David Meggers |
| **Tour Date:** | September 27 – October 8, 2018 |

## Personal Information:

| | **First Traveler** | **Spouse (if traveling)** |
|---|---|---|
| **Title (Mr., Mrs., Rev., etc):** | | |
| **Legal Passport Name:** | | |
| **Preferred First Name:** | | |
| **Male / Female:** | | |
| **Date of Birth:** | | |
| **Dietary Restrictions:** | | |
| **Physical Limitations:** | | |
| **Roommate:** | ❑ Please find me a roommate **(not guaranteed)** ❑ I prefer a single room **(extra charge)** | |
| | ❑ I plan to share with: | (no need to list spouse) |
| **Bedding:** | ❑ Single ❑ Double (1 bed) ❑ Twin (2 beds) ❑ Triple | |

## Contact Information:

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| **Mailing Address:** | Street:<br>City: State: Zip: |
| **Home Phone:** | |
| **Work Phone/s:** | |
| **Cell Phone/s:** | |
| **E-Mail Address/s:** | |
| **Emergency Contact:** | Name: Phone: Relation to you: |

## Travel Information:

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| **Flights:** | ❑ I will join the group flights ❑ I will arrange my own flights ❑ I need help with flights |
| **Pre-Tour:** | ❑ I plan to fly to Europe early ❑ I need assistance with pre-tour hotels |
| **Post-Tour:** | ❑ I plan to stay in Europe after the group leaves ❑ I need assistance with post-tour hotels |

## Passport Information:

❑ I am enclosing a photocopy of my passport, which is valid until at least 6 months after the return date.

❑ I am applying for, or renewing my passport, and I will send a copy of the photo page when I receive it.

## Travel Insurance:

We now include travel insurance through RoamRight, a division of Arch Insurance Company, in all our tours. However, you can choose to add pre-tour cancellation coverage.

**Travel Protection Plan (included in tour cost):** This policy includes medical and evacuation coverage, missed travel connections, trip delay, baggage delays, and lost luggage. Coverage is only valid during the tour.

**Trip Cancellation Plan (additional cost):** Coverage for cancelled and interrupted trips due to a variety of problems such as an accident, illness, death, jury duty, etc. The premium is $141 to cover the land portion of the tour and **approximately** $214 to cover both land and group air (dependent on actual air cost). If you incur additional trip costs i.e. pre or post-tour travel, you can visit www.ReformationTours/Insurance or call (800) 303-5534 to request a quote.

❑ I would like to add Trip Cancellation insurance (additional cost) for pre-tour coverage.

## Payments:

**Deposit:** The deposit of $350 per person is due at the time of reservation with the signed reservation form.

**Final Payment:** The final payment is due by July 14, 2018. An invoice will be sent one month prior to the due date.
We reserve the right to cancel this trip due to lack of subscription. In the event of cancellation of the trip in its entirety, a full refund of all deposits will be made to passengers enrolled at the time of cancellation. Tour price is based on the number of participants, the value of the dollar and the cost of airfare and is subject to change without notice.

**Cancellation Policy:** All cancellations must be in writing and the date of postmark will determine the amount of refund due. The following cancellation penalties apply, unless otherwise noted on the tour documentation:

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| From time of deposit to until 100 days before departure (6/19/18): | **$100** |
| From 99-15 days prior to departure (6/20/18 to 9/12/18): | **$350 plus any non refundable deposits** |
| 14 days or less prior to departure (9/13/18 or later): | **No refund** |

## Payment Information:

If paying by check, please make your check payable to “Reformation Tours”. If paying by credit card, please be aware that there is a **3.5% surcharge.**

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| **Credit Card Number:** | **Security Code:** |
| **Visa / MasterCard / Other:** | **Expiration Date:** |
| **Amount to put on card:** | **$ _____ + 3.5% $ _____ = $ _____** |
| **Name on the card:** | |
| **Billing address for card:** | |
| **Signature:** | **Date:** |

## Signature/s:

By my signature below, I acknowledge that I have read, understand and agree to the information contained in the reservation form and the “Terms and Conditions” applicable to the tour I have registered for. I hereby give my consent for Reformation Tours to use photographs of this tour in its publications, including its website.

Signature of First Passenger Date Signature of Second Passenger Date