

# 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 "Pack Your Bags Travel" and a photocopy of the photo page of your passport** (can be sent later) to Shannon Wright, 2750 Beacon Hill Parkway, Tuscaloosa, AL, 35406. We suggest you make a copy of this form for your records. Thank you.

**Tour Price:** \$3,499 land only (double / twin occupancy) based on a minimum of 20 travelers.

## Tour Information:

<b>Tour Name:</b>	FPC 200 <sup>th</sup> Anniversary Heritage Tour	<b>Tour Code:</b> RPB19
<b>Tour Date:</b>	June 14-24, 2019	

## Personal Information:

	First Traveler	Spouse (if traveling)
<b>Title (Mr., Mrs., Rev., etc):</b>		
<b>Legal Passport Name:</b>		
<b>Preferred First Name:</b>		
<b>Male / Female:</b>		
<b>Date of Birth:</b>		
<b>Dietary Restrictions:</b>		
<b>Physical Limitations:</b>		
<b>Roommate:</b>	<input type="checkbox"/> Please find me a roommate ( <b>not guaranteed</b> ) <input type="checkbox"/> I prefer a single room ( <b>extra charge \$960</b> )	
	<input type="checkbox"/> I plan to share with: _____ (no need to list spouse)	
<b>Bedding:</b>	<input type="checkbox"/> Single (1 person) <input type="checkbox"/> Double (2 people/1 bed) <input type="checkbox"/> Twin (2 people/2 beds) <input type="checkbox"/> Triple (with a child)	

## Contact Information:

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

## Travel Information:

<b>Flights:</b>	<input type="checkbox"/> I will join the group flights <input type="checkbox"/> I will arrange my own flights <input type="checkbox"/> I need help with flights
<b>Pre-Tour:</b>	<input type="checkbox"/> I plan to fly to Europe early <input type="checkbox"/> I need assistance with pre-tour hotels
<b>Post-Tour:</b>	<input type="checkbox"/> I plan to stay in Europe after the group leaves <input type="checkbox"/> 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:

Travel insurance is highly recommended for international travel. Details can be found on the tour webpage, or from Shannon Wright or Ree Almon at [packyourbags1@gmail.com](mailto:packyourbags1@gmail.com).

- I would like a quote for travel insurance
- I decline travel insurance and understand that I will need to cover any costs incurred that would have been covered by insurance.

## Payments:

**1<sup>st</sup> 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 March 31, 2019. A final invoice will be sent in February 2019. 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:** Regardless of reason, cancellations are costly. All cancellations must be in writing and the date of postmark will determine the amount of refund due. For flight changes or cancellations, revision fees and/or airline cancellation charges will apply. Roommates canceling can result in a single supplement charge for the roommate. The Participant who cancels will be responsible for that charge if a substitute roommate cannot be found. Cancellation and Interruption Insurance is strongly recommended. The following cancellation penalties apply, unless otherwise noted on the tour documentation:

From time of deposit to until March 15, 2019:	<b>\$100</b>
From March 16 – May 30, 2019:	<b>\$350 plus any non-refundable deposits</b>
14 days or less prior to departure:	<b>No refund</b>

## Payment Information:

If paying by check, please make your check payable to "Pack Your Bags Travel". If paying by credit card, please be aware that there is a **3.5% surcharge**.

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

## 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 and Pack Your Bags Travel to use photographs of this tour in its publications, including its website.

---

Signature of First Passenger

Date

Signature of Second Passenger

Date