## 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 \$500 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:	The Splendors of Austria and the Passion Play Tour Tour Co					
Tour Date:	June 13 - 25, 2020					
Personal Information	on:					
	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 (1 person) ☐ Double (2 people/1 bed)	☐ Twin (2 people/2 beds) ☐ Triple (with a child)				
Contact Informatio	n:					
Mailing Address:	Street:					
Mailing Address.	City: State:	Zip:				
Home Phone:		·				
Work Phone/s:						
Cell Phone/s:						
E-Mail Address/s:						
Emergency Contact:	Name: Phone:	Relation to you:				
Γravel Information:						
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 Furope 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 offer travel insurance through RoamRight, a division of Arch Insurance Company. We include \$500 coverage in your tour price and you are welcome to upgrade to cover the full tour premium. A quote will be automatically added to your invoice. To calculate the cost of the tour insurance: (land cost + air cost - \$500) x 6.14%. Coverage details can be accessed on our website: <a href="https://www.reformationtours.com">www.reformationtours.com</a> by selecting the "Insurance" tab under the "Resources" drop-down menu.
☐ I would like to upgrade to include pre-tour cancellation insurance. (The quote will be updated once we know the air price)
☐ I decline the pre-tour cancellation insurance.
Payments:
1st deposit: The deposit of \$500 per person is due at the time of reservation with the signed reservation form.
2 <sup>nd</sup> deposit: The deposit of \$500 per person is due by March 1, 2019.
<b>Final Payment:</b> The final payment is due by February 7, 2020. A final invoice will be sent in January 2020. 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 December 1, 2019:

\$350

From December 2, 2019 to May 29, 2020: \$650 plus any non-refundable deposits

14 days (May 30, 2020) or less prior to departure: 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**.

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.

Date

Signature of First Passenger	Date	Signature of Second Passenger	