

BATTLEFIELDS OF EUROPE TOUR 2023

June 03 - 15, 2023**Tour Price: \$4450 pp + \$750 pp tax based on double occupancy**

Organized by: Verstraete Travel and Cruises

Enter your COMPLETE NAME (please enclose a copy of the photo page of your passport)**1** Mr / Mrs / Ms

(Circle one)

Last Name:

First:

Middle:

Date of Birth (Day/Month/Year)

2 Mr / Mrs / Ms

(Circle one)

Last Name:

First:

Middle:

Date of Birth (Day/Month/Year)

Address:

Apt. #

Town

Province

Postal Code

Home Phone:

Cell Phone/Business Phone

E-mail:

Preference: Twin-bedded (2 beds) accommodation Double-bedded (1 bed) accommodation*(This would be a request only. The hotels will do their best to accommodate your preference but cannot guarantee room type)*

Single Supplement on Request

Airline and Travel Information: (Special Needs)Passenger **1** Diet: _____Wheelchair for distance/stairs at airports - Yes Passenger **2** Diet: _____Wheelchair for distance/stairs at airports - Yes Medical Information: **1** _____ **2** _____**If you would prefer your NAME BADGE** to show your name differently than the official name needed for the tickets, please fill in the information below:Passenger **1** _____ Passenger **2** _____**Emergency Contact in Canada:**

Last Name:

First:

Relationship

Town

Province

Home Phone

Bus. Phone

Insurance:

To protect yourself and your trip investment for trip cancellation and emergency hospital-medical emergencies, we strongly recommend that you purchase either the all-inclusive package plan or trip cancellation & interruption package plan for this trip.

All-Inclusive Package Plan - includes Out of Country Emergency Medical, Travel Cancellation & Trip Interruption, Travel Accident, Baggage and Personal effects.

Trip Cancellation & Interruption Package Plan (TCIPP) - same as above except there is **NO** Out of Country Emergency Medical Insurance.

Choose **either** the All-Inclusive Package Plan or Trip Cancellation & Interruption Package Plan (TCIPP) Insurance. Policy booklets and more information can be viewed by following the links on our website: www.verstraetetravel.com

You may also choose to add **"Cancel for Any Reason" (CFAR) coverage** for an additional 25% surcharge. **This must be purchased at time of deposit.** For more information, please refer to the TCIPP policy booklet on page 3 or the All-Inclusive Package Plan policy booklet on page 7.

Age at date of Travel	All-Inclusive	All-Inclusive with CFAR	TCIPP	TCIPP with CFAR
0 – 59 years	381.00	477.00	344.00	430.00
60 – 64 years	446.00	558.00	404.00	505.00
65 – 69 years	529.00	661.00	456.00	570.00
70 – 74 years	553.00	692.00	475.00	594.00
75 – 79 years	Call for quote		600.00	750.00
80 – 84 years	Call for quote		1,137.00	1,421.00
85 plus	Call for quote		1,137.00	1,421.00

All prices are exclusive of PST (no GST is charged on insurance premiums)

You have 10 days after purchase to review the policy and request a full refund.

If you have other travel insurance, please make sure that you have sufficient coverage.



If you choose **NOT** to purchase the offered insurance, **YOU MUST** sign and date this waiver.

I, the undersigned, have refused the purchase of Travel Insurance offered by Verstraete Travel and Cruises and therefore, I acknowledge and accept that any expenses incurred, while not covered by a travel insurance policy, will be my own financial responsibility. Because I have refused to purchase the insurance, Allianz and Verstraete Travel have no responsibility for these possible expenses.

Signature

Date

Verstraete Travel can only sell insurance to residents of Ontario. Residents of all other provinces must contact Allianz directly at 1-800-491-0851 and refer to agency code A251.

Deposit Information:

			# of passengers		
Tour deposit	\$1,000	x	_____	=	_____
Insurance passenger ①	1	x	_____	=	_____
Insurance passenger ②	1	x	_____	=	_____
8% PST on insurance premiums			_____		_____
Credit Card fee Per Person (if applicable)	\$95	x	_____	=	_____
		Total Deposit		\$	_____

Payment Options:

- Cheque Payable to Verstraete Travel & Cruises
- E-transfer Send to anne@verstraete.com (No password required)
- Credit Card Fill out information below

Credit Card Information: (if applicable)

Type of Card	Card Number	Expiry Date	CVV
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\$ _____

Amount of Deposit	Signature
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Deposit: **\$1,000 per person** deposit (non-refundable) at the time of booking **plus** your insurance payment, PST, and credit card service fee, if applicable.

Balance due: **April 1, 2023**

All "General Terms and Conditions" as stated on the Battlefields of Europe Tour brochure apply.

Application Date: _____ **Signature:** _____

Email completed booking form to: anne@verstraete.com

OR mail to:

Verstraete Travel & Cruises

300 - 14845 Yonge Street, Aurora, ON L4G 6H8

416-969-8100 1-800-565-9267 or fax 905-727-8113

email: aurora@verstraete.com

website: www.verstraetetravel.com