

HOLLAND & BELGIUM TEXTILE TOUR

September 4 - 14, 2024

Organized by: Verstraete Travel and Cruises

Tour Price: CAD \$4,375 plus tax of CAD \$830 per person, based on double occupancy.

Tour Host: Karen Brown of Just Get It Done Quilts

Tour Leader: Anne Winter, Manager Verstraete Travel & 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: E-mail:

Hotel Arrangements:

Please indicate your bedding preference below. (Requests are forwarded to hotels, but they will not guarantee)

1 room, 2 twin beds 1 room, 1 double bed *Single supplement price provided upon request.*

Airline and Travel Information: All flights depart from Toronto Pearson International Airport

Please do not book any connecting flight to Toronto until we have confirmed the flight number and time of your transatlantic flight.

Special Needs:

① Diet: _____ Wheelchair No yes, for distance/stairs

② Diet: _____ Wheelchair No yes, for distance/stairs

Medical Information: ① _____ ② _____

If you require assistance in getting around, you must travel with a companion who can assist you.

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 _____ ② _____

Emergency Contact in Canada:

Last Name: First: Relationship

Town Province Home Phone Cell Phone

INSURANCE: *Provided by Allianz Insurance*

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

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

Non-Medical Plan - same as above except there is NO Out of Country Emergency Medical Insurance.



Choose **either** of the two insurance options.

Age at time of travel	Comprehensive Plan	Non-medical Package
0 - 59	412.35	367.10
60 - 64	482.89	406.57
Medical Screening Required	If answers to all questions are "NO", the rate would be:	
65 - 69	490.19	410.57
70 - 74	508.57	412.93
75 - 79	678.51	443.77
80 - 85	785.39	484.50

Insurance rates are estimates, rates are subject to change and will be confirmed at the time of sale.

Control + click on these links below to access more information:

[Allianz - Medical Screening Form.pdf](#) – 3 simple questions to answer.

[Allianz - Comprehensive Insurance Policy.pdf](#)

[Allianz - Non-Medical Package Policy.pdf](#)

There is also an option to purchase the above insurance with “Cancel for Anytime for Unforeseen Reasons” Coverage as explained in this document:

[Allianz - Main Coverage Benefits and Cancel for Unforeseen Reason Information.pdf](#)

Quotes provided on request.

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.

Verstraete Travel can only sell insurance to RESIDENTS OF ONTARIO. Residents of all other provinces or the United States must contact Allianz directly at 1-800-491-0851 and refer to agency code A251.

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

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

The insurance premium is non-refundable as soon as payment has been received.

If you have any travel insurance through your credit card company or elsewhere, please make sure that you have sufficient coverage.

Please indicate type of insurance chosen:

Participant 1: Comprehensive Non-Medical None (sign waiver)

Participant 2: Comprehensive Non-Medical None (sign waiver)

Payment Details:

	Item	Cost		# of Participants	Total
All Participants	Deposit	\$ 1,100.00	x	_____	= _____
Participant 1	Insurance premium	_____	x	1	= _____
Participant 2	Insurance premium	_____	x	1	= _____
All Participants	Credit Card fee per person	\$ 145.00	x	1 or 2	= _____
				Total Deposit	\$ _____

Payment by:

Cheque Payable to Verstraete Travel & Cruises

E transfer to anne@verstraete.com

Credit Card (Visa or Mastercard only) – fill in information below.

Type of Card	Card Number	Expiry Date	CVV (# on back of card)
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\$ _____

Amount of Deposit	Signature
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Deposit: CAD \$1,100 per person is due at the time of booking plus your insurance payment (if applicable).
Balance due: June 20, 2024

All "General Terms and Conditions" as stated on the HOLLAND AND BELGIUM TEXTILE TOUR 2024 brochure apply.

Application Date: _____ **Signature:** _____

By submitting and signing this application, I acknowledge that all passengers are medically fit to travel. I/we will notify Verstraete Travel if there is any change in my/our medical condition which would affect my/our ability to travel.

Mail or email booking form and deposit information to:

Verstraete Travel & Cruises

300 - 14845 Yonge Street, Aurora, ON L4G 6H8 416-969-8100 or toll free: 1-800-565-9267

Email: anne@verstraete.com Website: www.verstraetetravel.com