CHAMPION SERVICES TRAVEL DUBAI & ABU DHABI 2023 TOUR

Payment Schedule: Not adhering to the payment schedule can result in late payment penalties, cancellation without notice and/or rate increases.

- \$450 per person non-refundable deposit Due at the time of booking
- \$1050 per person second deposit balance after initial deposit Due by March 03, 2023 (if booking for the first time at this date a total payment of \$1500 is due at the time of booking)
- Full and final payment is due by July 2, 2023
- ALL PAYMENTS ARE MADE PAYABLE TO CHAMPION SERVICES TRAVEL OR CST. Mailing address; PO Box 44140, FT. Washington, MD. 20749 (No faxed registrations please)
- OPTIONAL PAYMENT PLAN: \$411 PER PERSON, PER MONTH STARTING JAN. 2023 THRU JUL. 02, 2023 (double occupancy) \$500 per month (SINGLE OCCUPANCY). THE SAME MONTHLY PAYMENT SCHEDULE AS ABOVE WILL APPLY. (7 Monthly Payments)

Cancellation:

- \$450 Initial Deposit is nonrefundable and nontransferable
- 100% of the deposit (\$1500) is non-refundable if canceled on or before March 3, 2023
- 100% of the total package price is non-refundable if canceled on or after July 30, 2023 including No-Show

We must receive your cancellation notice in writing by mail, email or overnight courier, and your cancellation date will be the date we receive your notice. Your decision not to participate on the Tour due to State Department warnings, fear of travel, or the like will be deemed a cancellation. If a flight you organized or other delay for any reason prevents you from joining the Tour on the Tour start date, you will be considered a no-show, and we cannot provide a full or partial refund or credit toward a future Tour, but you may join the Tour late if you wish.

Price Details:

\$2880 per person based on double occupancy / \$3530 per person based on single occupancy (Upgrades for Air and or Hotel, please contact agency. Based on availability)
PAYMENTS ARE MADE PAYABLE TO CHAMPION SERVICES TRAVEL OR CST. Mail to: PO Box 44140, Fort Washington, MD. 20749

Description: Include number of nights, Package inclusions, Departure city, Dates of travel and Exclusions / For UAE FAST Facts click here – customised group pre-tour details to come

Round Trip International Domestic Air, on Emirates Airlines from Dulles Itl. to Dubai, hotel/resort accommodations, full day in Abu Dhabi, 6 nights in Dubai, breakfast daily and other meals indicated in itinerary, all airport transfers, English Speaking Guides in Air conditioned Coaches, select tours per itinerary. **Not Included:** Tour Assistance, Guide & Driver Gratuities, Meals not mentioned, Travel Protection Insurance (mandatory) and things of a personal nature. Tipping will be collected upon hotel checkin (Suggested amount \$84 each/\$12 pp-pd). 2023 Airline taxes and fees are subject to change per industry. You will be notified in advance. Please note with group bookings preferred air seating selections are not guaranteed. Late night hotel check-out on departure day cost anda dditional \$188 per room. Business Class Air upgrade is starting at \$5,000 pp in addition to this package price; see agent for details.

I AGREE TO PA	Y THE ABOVE TOTAL AMOUNT AC	CORDING TO T	HE PARTICIPAN	T AGREEMENT. <mark>O</mark>	NLY CLEAR, LEG	GIBLE & COMPLETE R	EGISTRATIONS WILL BE ACCEPTED!
Name:		· · · · · · · · · · · · · · · · · · ·	(EXACT)	LY as it appears on your	Passport) - Mal	le Female	Trip Code: CUAE/23
Address:	Cit	City:		ST: Z	ip:	Home Ph:	
Cell:	Email:					Air Seat Prefer	ence:
Rooming with:			Sharing	same invoice: yes	/ no _	(Passport # fo	r 2 nd person only if sharing the same invoice)
Fraveler 1 DOB:	_// Traveler 2 DOB:	_	_				
Seeking a roommate:	Yes (CST is not responsible for provi	ding a roommate)	_	Form of Payment:	CC CK	MO CCK	(Credit card payment add 3% processing fee)
C#:	Exp.:				and any f	uture payments per each req	uest <mark>(CC holder mailing address must be provided</mark>
1 0	ee to amount being charged) DISCOVER CARD NOT ACCEPTED by of your passport at registration or by June.	<mark>02, 2023. No Faxed</mark>	/Email Copies! In cas	e of an emergency, plea	se contact: Name	:	
Phones:		Special Dietary or	Medical Needs:				
	(Some needs may not be accommodated) T-Shirt Size: _	/		FF#		TSA Pr. Check-In #	!
Print Signatory Name			Y			Cianatura	Plassa Nata: / /