



AAA Northeast

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1854 Atwood Ave.; Johnston, RI 02919

Group Name: Fun Seekers LLC | Tour Name: Iceland & Ireland | Travel Dates: 6/15/22 – 6/26/22 | Code: AF-FUN06152022

Please complete the form below and mail it, along with a copy of your passport to the address above. Names MUST be listed in full exactly as they appear on your passport. If the name on your reservation does not EXACTLY match the name on your passport, you will not be allowed to proceed through TSA. Name changes and/or modifications will result in a fee.

YOUR INFORMATION

First / Middle/ Last Name _____

DOB ____/____/____ Address _____
MM DD YYYY Number Street State Zip

Phone _____ Email Address _____

Rooming with _____ DOB ____/____/____
MM DD YYYY

Emergency contact name _____ Phone _____

TRAVEL PROTECTION

[] Yes, I would like to purchase travel protection [] No, I decline travel protection

Travel Protection must be paid by Check to Fun Seekers LLC.

Travel Insurance cost: Double per person \$326 Single Occupancy \$388

AIRLINE INFORMATION

Seat Request* [] Aisle Window [] Next to travel companion

*AAA Northeast cannot guarantee your seat preference. Please be advised, when travelling as part of a group many airlines do not provide seat assignments in advance.

AAA MEMBERSHIP

Are you a AAA Member? [] Yes [] No Membership number _____

SPECIAL NOTES

Please use this area to note any special requests, dietary restrictions, food allergies, or medical restrictions

NOTES

*All US citizens traveling outside of the United States are required to carry a valid passport. Passports must be valid for at least six months from the date of your return to the US. For up-to-date international travel documentation, visit www.travel.state.gov well in advance of your travel.

DEPOSIT AND FINAL PAYMENT

Deposit: \$500 due at the time of booking.

Final Payment: Due by February 10, 2022

PAYMENT INFORMATION

Method of Payment: Check [] Please make all checks payable to: Fun Seekers LLC Deposit Total _____

Credit Card [] AMEX [] VISA [] DISCOVER [] MASTERCARD []

Credit Card # _____ Exp. Date ____/____/____ CVV _____

Signature _____ Date ____/____/____
MM DD YYYY

*Cash deposits are not accepted; for security reasons, when emailing your reservation form, we will call to take credit card details.

Cancellation Schedule: More than 125 days prior: \$500; 119 – 91 days prior to travel: 50% of land and air cost; 90 days prior to travel: 100% of land and air cost

CONFIDENTIAL