

WERNER TRAVEL TERMS & CONDITIONS

COST: \$3700 (*Price is subject to change*)
 (Double occupancy; single supplement: \$900)
 (Minibus transport and tourist class lodging)

RESERVATIONS:

- \$1000 deposit and reservation form due Oct 16, 2024
- \$1500 due Jan 1, 2025
- \$1200 due Mar 1, 2025 (currency orders will also be due)
- All payments must be in the form of a check made payable to "Rev. David Werner."

AIRLINE & IDENTIFICATION SECURITY: Travelers must provide passport ID at time of airport check-in. Passport information is also required at time of deposit to assist in booking airline tickets.

OPTIONAL TRAVEL INSURANCE: You are on your own to secure travel insurance should you wish to (**strongly recommended for travel of this nature and expense**). It is usually non-refundable. We have used World Nomads in the past.

CANCELLATION:

- The tour may be cancelled if there are not 18 travelers by Oct 16, 2024.
- If you choose to withdraw between Oct 17, 2024 and Jan 1, 2025, you will forfeit the deposit.
- If you choose to withdraw between Jan 31 2025 and Mar 1 2025 you will forfeit 50% of the tour cost.
- If you choose to withdraw after Mar 1 2025, you will forfeit 100% of the tour cost.

RESPONSIBILITIES: Tour personally hosted by David & Teresa Werner. We act as tour leaders on behalf of travelers in arranging flights, lodging, transportation, sightseeing, and restaurants. We reserve the right to change the itinerary and are not responsible for expenses, loss of time, money or other happenings resulting from a change of tour scheduling made for travelers. We are not responsible for any losses or damages of personal property or for injuries, expenses or damages incurred by any traveler.

Please complete this form and return it with your payment to: Teresa Werner, 2734 Viola Heights Dr NE, Rochester MN 55906



RESERVATION FORM (*please print*)

FIRST TRAVELER

Full Name (*as it appears on passport*)

Passport Number & Expiration Date

Date of Birth (MM/DD/YYYY)

Street Address

City

State

Zip Code

Phone #

Email Address

Cell Phone #

Emergency Contact Name:

Phone:

Name of Roommate (if on separate form)

SECOND TRAVELER

Full Name (*as it appears on passport*)

Passport Number & Expiration Date

Date of Birth (MM/DD/YYYY)

Street Address (*if different than First Traveler*)

City

State

Zip Code

Phone #

Email Address

Cell Phone #

Emergency Contact (*if different than First Traveler*) Name:

Phone:

Check if single accommodation desired (\$900 surcharge)

Signature Required (*First Traveler*)

Signature Required (*Second Traveler*)