

All About Destinations

See the USA! Group Travel at it's BEST!



16290 Seneca Trail
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allaboutdestinationstravel.com

DISCOVER ITALY

APRIL 15-22, 2023

SIGN-UP FORM

(no more than Adult 2 participants per form)

(Children names can be added below "Additional Participants")



Trip Cost	Travel Insurance
\$2950 ^{PP} (double) \$3700 ^{PP} (single)	check webpage for details

TRIP COST INCLUDES

See Detailed Itinerary

DEPOSIT REQUIRED: \$1000 per person

FINAL PAYMENT DUE 30 DAYS PRIOR TO TOUR

Please Fill-Out Legibly:

NAME OF TRIP & DATE: **DISCOVER ITALY: APRIL 15-22, 2023**

FULL NAME:

ADDRESS, CITY, STATE, ZIP:

PHONE:

CELL:

EMAIL:

ADDITIONAL PARTICIPANTS:

TRAVEL INSURANCE:

SEE WEBPAGE FOR DETAILS!

INSURANCE ANTICIPATED : ____ INSURANCE DECLINED: ____

PAYMENT TYPE: CASH Or CHECK: ____ CREDIT: ____

(With Credit Option, Please Fill Out Card Information Below)

Credit Card Information: (Only If Paying By Credit Card) YOU CAN PAY IN FULL OR PAY THE DEPOSIT (Balance due by 10 days prior to the trip)

CREDIT CARD TYPE: ____ AMERICAN EXPRESS ____ DISCOVER ____ MASTERCARD ____ VISA

CREDIT CARD #: _____ EXPIRATION DATE: _____ ZIP CODE _____

SIC CODE: _____ (3 or 4 Digit Code Found On Back Of Card) CARD HOLDER SIGNATURE: _____

Amount To Be Charged @ Sign-Up: _____ Amount To Be Charged No Later Than : **April 1, 2023**

Credit Card Charging Date Instructions (ie: when to make charges and amounts) _____

*** If accepting Trip Cancellation Insurance & paying by check, please include insurance payment in addition to your deposit.

*** If accepting Trip Cancellation Insurance & paying by credit card, your insurance cost will be billed with your deposit. ***

Please see [TERMS, POLICIES, & GENERAL INFORMATION](#) on our website before sending in any payment.

*** **Please Do Not Cut Or Tear Form.**

Participant Signature: _____

Date: _____