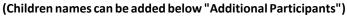


## DISCOVER ITALY APRIL 15-22, 2023

**SIGN-UP FORM** 

(no more than <u>Adult</u> 2 participants per form)





Trip Cost	Travel Insurance
<b>\$2950</b> PP (double) <b>\$3700</b> 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:	PAYMENT TYPE: CASH Or CHECK: CREDIT:	
SEE WEBPAGE FOR DETAILS!	(With Credit Option, Please Fill Out Card Information Below)	
INSURANCE ANTICIPATED : INSURANCE DECLINED:		
Credit Cord Information: (Only If Daving Dy Credit Cord)		
Credit Card Information: (Only If Paying By Credit Card) YOU CAN		
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 Data Instructions (includen to make charges and emounts)		

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

Participant Signature: \_\_\_\_\_

<sup>\*\*\*</sup> 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.