

# GENERAL INFORMATION

(KEEP TOP PORTION FOR YOUR RECORDS)

1. The price of the Washington Educational Tour is subject to increase if there are less than 65 total paid participants or changes occur in fuel surcharges or taxes. Per person surcharges are: \$40.00 for 60-64 total paid participants and \$100.00 for 55-59 total paid participants. For less than 55 total paid participants, the surcharge will be provided.
2. Per person insurance coverage: \$5,000 life, \$1,500 illness, \$5,000 accident and \$750 dental.
3. The deposit and additional payments are required by the dates indicated in the cover letter. Personal and/or business checks will not be accepted 28 days or less prior to the tour. Prior to departure, information will be sent specifying final details of the tour.
4. Failure to completely pay for the tour by the deadline date may result in the participant being dropped from the tour. If space is still available after the deadline date, a \$50.00 late payment fee will be assessed plus any extra airfare, if applicable.
5. A service fee of \$35.00 is assessed for NSF checks or stop payment checks.

**CANCELLATION POLICY: ALL CANCELLATIONS MUST BE IN WRITING TO EDUCATIONAL TOURS, INC., P.O. BOX 828, NORTHBROOK, IL 60065-0828.** The date of the postmark is the date used to determine the amount of the cancellation fee. Refunds take approximately 4-6 weeks and will be issued in the same form as payment was made.

\* Individual cancellations, for any reason, will be subject to the following fees to be retained by Educational Tours, Inc.:

more than 60 days before the tour	\$100.00
from 59-31 days before the tour	50% of tour cost
from 30 days before the tour to date of departure	100% of tour cost

\* If the tour moderator or school cancels an individual or the tour, individual cancellation fees apply.

\* If the tour moderator or school changes the tour date or destination, all monies received will be transferred to the new tour date/destination. Individual cancellations after the date/destination change will be subject to the same cancellation fees.

\* If Educational Tours, Inc. changes the date/destination and you feel it necessary to cancel because of the change(s), a full refund will be provided as long as a letter is received postmarked no more than 14 days after the change is announced.

**REFUND GUARANTEE PROTECTION (RGP)** – Should a tour participant need to cancel for any reason prior to departure, RGP guarantees you a full refund of all monies paid, less the cost of this option and any NSF or late fees. By accepting RGP, the cost will be included in your invoice. To decline RGP, simply check the box below. By not accepting RGP, the above stated cancellation policy applies with no exceptions. *ET strongly recommends accepting RGP as part of your tour package.*

**RESPONSIBILITY:** Educational Tours, Inc. is not responsible for any services or accommodations provided by third parties and disclaims any liability for personal injury, property damage, or other loss to the traveler unless such damage, injury or loss is caused by the willful and wanton negligence of Educational Tours, Inc. With respect to the student traveler, the student and his/her parent(s) or guardian assume full responsibility for any damages, injury, or losses that might occur during the tour except as stated above.

To register for this tour, please visit [www.educationaltours.com](http://www.educationaltours.com) and enter Booking Code 838-69478.

If you are unable to register online, please detach and return with your payment to:

**Educational Tours, Inc. – P.O. Box 828 – Northbrook, IL 60065-0828**

Participant's Name (Please Print) \_\_\_\_\_

Address \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Please check one:

Student

Adult

Male  Female

**POPE JOHN XXIII SCHOOL (SCOTTSDALE, AZ) – #69478 (07/08 TS)**

Parent/Guardian's Name \_\_\_\_\_ E-mail \_\_\_\_\_

Work Numbers: Father (\_\_\_\_) \_\_\_\_\_ Mother (\_\_\_\_) \_\_\_\_\_

I do not accept Refund Guarantee Protection (RGP). By declining RGP, I understand that I will be subject to the full cancellation policy as outlined above and agree that 100% of the trip price is non-refundable if I cancel within 30 days of departure for any reason.

I permit my child to participate in the Washington Tour from April 28-May 2, 2008. I have read and agree to the above General Information including the Cancellation Policy, Surcharges, Responsibility, and Refund Guarantee Protection.

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*UNSIGNED APPLICATION WILL BE RETURNED WITH DEPOSIT\***

If paying by credit card: Please charge my [  ] Visa, [  ] MasterCard *or* [  ] Discover account for \$ \_\_\_\_\_.

\*Since an original signature is required, phone calls and faxes will NOT be accepted for credit card payments.

**POPE JOHN XXIII SCHOOL (SCOTTSDALE, AZ) – #69478 (07/08 TS)**

Participant Name \_\_\_\_\_ Street \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name as it appears on the card \_\_\_\_\_ Home Phone \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_ Work Phone \_\_\_\_\_

For Office Use: ID # \_\_\_\_\_ Approval # \_\_\_\_\_ Ref # \_\_\_\_\_ Today's Date \_\_\_\_\_

**FILL OUT COMPLETELY.** Registration will be processed only when credit card information is complete.