

PASSPORT TO LANGUAGES - Italian Riviera, Milan and the Lakes Tour 2025 – April 11- April 19, 2025 – RESERVATION FORM

\$2,800 pp/ cash or check **Double Occupancy** **\$2,917 pp/ credit card payment** **Double Occupancy**

\$3,476 pp/ cash or check **Single Occupancy** **\$3,620 pp/ credit card payment** **Single Occupancy**

Please send a deposit of \$600 per person due as soon as possible. Space is limited and available on a first-come, first-served basis. The balance is due by February 01, 2025. **Make your check payable to Passport to Languages and mail to Passport to Languages, c/o Daniela Ciccone, 38 Gaglione Court, Cranston, RI 02921**

The tour price does not include airfare. However, economy group airfare on Delta Airlines has been reserved and available for purchase through Donovan Travel for \$1641 per person. Other classes of service available upon request. Please contact Collette at Donovan Travel at 885-3500 to purchase the group airline ticket.

Trip Cancellation insurance is highly recommended and should be purchased within 14 days of deposit in order to cover preexisting conditions. Please contact Collette at Donovan Travel for an insurance quote.

Please note: If you arrange your own flights, you will need to be at Milan Malpensa airport by 9:30 am on Saturday, April 12th, in order to take advantage of the bus transportation from Malpensa Airport to our hotel in Rapallo.

I/we understand that the balance is due by February 1, 2025. Full refunds minus a \$25.00 service fee will be returned to passengers if cancellation is given prior to November 15, 2024.

Cancellation between November 15, 2024 and December 14, 2024, \$150 of the deposit is non-refundable

Cancellation between December 15, 2024 and January 1, 2025, \$250 of the deposit is non-refundable

Cancellation between January 2, 2025 and January 31, 2025, \$350 of the deposit is non-refundable

Cancellation between February 1, 2025 and February 15, 2025, the full deposit is non-refundable

Cancellation between February 16, 2025 and March 10, 2025, 50% of the full tour price is forfeited.

Cancellation after March 10, 2025 (one month prior to departure) – no refund

A valid Passport is required. Please note: Your passport must be good for a minimum of six (6) months after your return date.

RESPONSIBILITY: Passport to Languages and their agents, in accepting bookings for this tour, clearly stipulate that they are not liable for faults or defaults of other companies and persons that may be used in the carrying-out of the tour services, also for accidents, baggage losses, delays, or cancellations, strikes, political unrest, riots, and acts of God and war, and changes in schedules. In the event it becomes necessary or advisable, for the comfort or well-being of the passengers, or for any reason whatsoever, to alter the itinerary or arrangements, such alterations may be made without penalty to Passport to Languages. Additional expenses, if any, shall be borne by the passengers. The right is reserved to withdraw the tour due to insufficient participation or for any reason whatsoever; also, to decline to accept or to retain any person as members of the tour. The contract in use by the bus companies concerned constitutes the sole contract between the company and purchase of this tour and/or passengers. The submission of the initial deposit shall be deemed to be consent to and acceptance of the foregoing terms and conditions. Passport to Languages is not responsible for any disruption or cancellation of services due to erroneous identification information provided by passengers.

PLEASE PRINT CLEARLY & COMPLETELY!

Please remit a photocopy of the photo page of your passport with your reservation form; for purposes of clarity

Name (as it appears on passport): _____

Passport #: _____ Place of Issue: _____ Citizenship: _____ Exp. Date: _____

Address: _____ City: _____ State: _____ ZIP: _____

Best Phone #: _____ HOME CELL WORK Alt. Phone #: _____ HOME CELL WORK

Date of birth: _____ E-mail: _____

In Case of Emergency, Notify: _____ Phone # _____

Roommate: Name (as it appears on passport): _____

Passport #: _____ Place of Issue: _____ Citizenship: _____ Exp. Date: _____

Address: _____ City: _____ State: _____ ZIP: _____

Best Phone #: _____ HOME CELL WORK Alt. Phone #: _____ HOME CELL WORK

Date of birth: _____ E-mail: _____

In Case of Emergency, Notify: _____ Phone# _____

I have read, understand and accept the policies listed on this form.

Signature: _____ **Date** _____

