

School/Group & Trip Sponsor: Chaparral High School Band, Orchestra, Theatre
Trip Name & Dates: Orlando, FL March 16 -21, 2017

PARTICIPANT'S INFORMATION – Please print legibly:

Legal Name: First /Middle/Last names as printed on photo ID
City _____ **State** _____ **Zip Code** _____
Cell Phone _____ **Home Phone** _____
Email _____
Date of Birth _____ **Citizenship** _____

FATHER/GUARDIAN'S NAME: _____
Mailing Address (including zip code) _____
Cell Phone _____ **Home Phone** _____ **Work Phone** _____
Email _____

MOTHER/GUARDIAN'S NAME: _____
Mailing Address (including zip code) _____
Cell Phone _____ **Home Phone** _____ **Work Phone** _____
Email _____

HEALTH INFORMATION:

Medical Insurance Company: _____ **Phone** _____
Policy Number: _____
Family Doctor: _____ **Phone** _____
Allergies (to include food): _____

We agree that the Participant can receive non-prescription medicine during the trip if the need arises. We agree that in the event of an emergency the trip leaders may authorize emergency medical treatment for the Participant if a parent or guardian cannot be reached.

The Participant is in good health, does not take medications, and has no special medical conditions. List exceptions here. Attach a separate sheet if more space is necessary.

Trip Cost, Payments, Cancellations, & Refunds: Each participant enrolled in the tour shall follow the terms of the contract in which a refund will be addressed in the event of cancellation.

CANCELLATIONS*:

Cancellation penalties and fees are based on the date of cancellation. The initial deposit of \$200.00 is non-refundable upon receipt. In addition to the nonrefundable \$100 the following penalties will be assessed and *nonrefundable:

90 - 61 days prior to the tour departure date	\$ 50% of the tour cost (per person)
60 days prior until the tour departure date	\$ 100% of the tour cost (per person)

Travel Insurance (circle one): The Participant Accepts / Declines to purchase travel insurance. To purchase insurance please fill out and submit an Insurance Application and payment to Celestial Travel & Tours.

**If travel insurance is purchased, upon cancellation a claim can be started with the insurance company for any non-refundable amount (excluding the insurance premium). The insurance premium payment is non-refundable and cannot be claimed. That cost will be deducted prior to any refund being issued.*

We have read, fully understand and agree with the terms of this Application and the Consumer Disclosure Notice printed on this form.

Participant's Signature: _____

Father/Guardian's Signature: _____

Mother/Guardian's Signature: _____

Date: _____

CONSUMER DISCLOSURE NOTICE:

Please read the terms & conditions carefully, as your deposit payment on a trip signifies acceptance of the terms & conditions & the general information contained in the brochure. These trips are arranged by Celestial Travel & Tours (CT&T). It has made the travel arrangements as agent for the transportation carriers & other suppliers (SUPS) of services connected with the tour, all of which are independent contractors. CT&T in no way owns or operates the vehicles or facilities to be used during the trip, & does not guarantee performance by, or assume responsibility for the acts &/or omissions of SUPS, their employees, agents, etc. All bookings are accepted subject to the conditions imposed by SUPS & CT&T, including, but not limited to, the airline, cruise line, rail, coach, hotel, restaurants, insurance & other companies, firms or persons concerned with the trip. CT&T will make no refund in the event of their delay, cancellations, overbooking, strike, force majeure or for elements of the package not used by customer. If there is a difference between CT&T conditions and those published by a SUP, the conditions of SUP shall apply. Price quoted is per person quad (4 to a room) occupancy. CT&T reserves the right to cancel a trip, change the itinerary or adjust rates whenever in its sole judgment conditions warrant, or if CT&T deems it necessary for your comfort, convenience or safety. CT&T reserves the right to correct an error in the advertised price prior to your departure. Trips outside the USA require a valid U.S. passport or other acceptable forms of citizenship proof. You are responsible for, & release CT&T from passport, visa, vaccination requirements & safety conditions in travel destinations. CT&T strongly recommends you purchase appropriate travel/medical/baggage/cancellation insurance for the trip, which is available from CT&T. For medical info, call Public Health at 301-443-2403, & for travel advisories US State Dept. at 202-647-5225, www.state.gov. A contract is made when your reservation & payment are accepted by CT&T in its home office in Colorado & any disputes shall be governed by Colorado law & are subject to exclusive jurisdiction and venue in court at Denver,

Colorado. In calculating the cost of your trip, CT&T has relied on your consent to these terms & in the absence of this release, the trip cost would have been higher. The Participant and his/her Parents/Guardians hereby agree

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to indemnify CT&T, its officers and employees, and hold them harmless from damages and costs resulting from claims that are presented notwithstanding this Consumer Disclosure Notice.

CODE OF CONDUCT: All tour members shall observe reasonable rules of safety and conduct as directed by the trip leader, aided by teacher(s) chaperones and the tour escort, who has absolute authority to expel any tour participant whose actions or behavior are considered detrimental to the group's welfare. The trip leader, teacher(s), Celestial Travel & Tours and its employees and agents are released from any liability to any expelled participant for such expulsion. No refunds shall be made, and the parents/guardians agree to accept a collect call and pay the cost to return the participant home via commercial transportation.



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