

IMPORTANT RESERVATION INFORMATION

PAYMENTS:

A per person deposit is due with passenger names.
Second Deposit of \$1,000 Per Person is Due One Year Prior to Departure.
The second deposit is applicable for all tours that include Oberammergau.
Final payment is due 120 days prior to departure.

IDENTIFICATION

Passports are required for this tour at your expense. Certain countries require a minimum of 6 months passport validity. You are strongly urged to contact the appropriate consulate for details. Visit www.travel.state.gov for the U.S. State Department for the latest details about passports and visa requirements.

IMPORTANT: We recommend that our clients traveling abroad take a photocopy of their passport and applicable visas. It should be packed separately from your actual passport and visa. We also recommend leaving a copy at home with your emergency contact.

For Oberammergau: Deposits are non-refundable; A cancellation fee of 75% will apply for cancellation between 120-90 days prior to departure; A cancellation charge of 100% will apply for cancellation less than 90 days prior to departure. Cancellation protection is highly recommended and must be purchased at time of deposit. Air rates are subject to change until tour is paid in full. Cancellation charges also apply to reservations made for "pre" and "post" night accommodations. Purchase of Waiver and Insurance guarantees a full refund of all payments (including deposit), except the Waiver and insurance fee itself, made to Collette Vacations for travel arrangements in case of cancellation of your travel plans for any reason prior to the day of departure. The Waiver and Insurance does not cover any single supplement charges which arise from an individual's Traveling companion electing to cancel for any reason prior to departure. Please see your sales agent for more information, or review our brochure for details.

Consumer Protection Plans: Collette Travel Service holds membership in the following highly reputable industry organizations: the United States Tour Operators Association and the American Society of Travel Agents. Each association operates a consumer protection plan to cover deposits made by travelers. Full details are available from the organizations or Collette Travel Service. Collette is pleased to give this additional protection to our clients. **Our California Sellers of Travel registration number is 2006766-20. Our State of**

Washington Unified Business Number is 601220855. Our Nevada Sellers of Travel registration number is 2003-0279.

Responsibilities: Neither Collette Travel Services, Inc., its affiliated entities and its and their employees, shareholders, officers, directors, successors, agents, and assigns (collectively "Collette"), own or operate any person or entity which is to or does provide goods or services for these trips. Because neither maintains any control over the personnel, equipment, or operations of these suppliers, Collette assumes no responsibility for and cannot be held liable for any personal injury, death, property damage or other loss, accident, delay, inconvenience, or irregularity which may be occasioned by reason of (1) any wrongful, negligent, willful or unauthorized acts or omissions on the part of any of the suppliers or other employees or agents, (2) any defect in or failure of any vehicle, equipment, or instrument owned, operated or otherwise used by any of these suppliers, or (3) any wrongful, willful or negligent act or omission on the part of any other party not under the supervision and control of Collette. Additionally, responsibility is not accepted for losses or expenses due to sickness, lack of appropriate medical facilities or practitioners, weather, strikes, theft or other criminal acts, war, terrorism, computer problems, or other such causes. All services and accommodations are subject to the laws of the country in which they are provided. Collette reserves the right to make changes in the published itinerary whenever, in their sole judgment, conditions warrant, or if they deem it necessary for the comfort, convenience, or safety of the tour. They reserve the right to withdraw any tour announced. Collette reserves the right to decline to accept any person as a member of the tour, or to require any participant to withdraw from the tour at any time, when such action is determined by the tour manager to be in the best interests of the health, safety, and general welfare of the tour group or of the individual participant. Neither does Collette accept liability for any carrier's cancellation penalty incurred by the purchase of a non-refundable airline or other ticket to the tour departure city and return or otherwise. Baggage and personal effects are the sole responsibility of the owner at all times. Participants may be photographed for the promotional purposes of Collette. Arbitration - I agree that any dispute concerning, relating, or referring to this contract, the brochure or any other literature concerning my trip, or the trip itself, shall be resolved exclusively by binding arbitration according to the then existing rules of the American Arbitration Association in Rhode Island. Such proceedings will be governed by substantive Rhode Island law.

Payment of the deposit to Collette constitutes acceptance of these terms and conditions.



Photos shown are reflective of the area(s) visited, but may not be included in the actual tour itinerary.

September 1, 2010 – Exploring the Alpine Countries

First deposit of \$500 per person due upon reservation. *Reservations are made on a first come, first serve basis.

Final payment due by 5/2/2010.

Second Deposit of \$1,000 Per Person Is Due One Year Prior To Departure Date.

This second deposit is applicable for all tours that include Oberammergau.

Make checks payable to: Wade Travel Agency

For Reservations Contact: Wade Travel Agency
Attn: Denise Rucinski
797 Burdeck St
Schenectady, NY 12306-1297

518-355-6767



COLLETTE
VACATIONS

Please select one of the following gifts per person: Travel Bag Toiletry Bag

Your Name: Mr./Mrs./Ms. _____ Rooming with _____
(Please print as it appears on Passport) (Please print as it appears on Passport)

Nickname (as you may prefer to be addressed): _____

Your Address: _____ Email Address: _____

City: _____ State: _____ Zip Code: _____ Phone: () _____ Cell: () _____

Passport Number: _____ Date of Issuance: _____ Expiration Date: _____

City, State, Country of Issuance: _____

Date of Birth: _____ City, State, Country of Birth: _____

Gender: Male Female Citizenship: _____

Emergency

Contact Name: _____ Telephone: () _____ Relationship: _____

I wish to purchase cancellation waiver and insurance at \$350 per person: Yes No (Payment due with first deposit.)

Please note: If you choose not to purchase Collette's Waiver Insurance Plan, you will incur penalties for changes and cancellations (see brochure for details)

Deposit Amount: \$ _____ Waiver/Insurance Amount: \$ _____ Total amount enclosed: \$ _____

Please advise your departure airport for this tour: _____

Air Seat Request Aisle Window (Collette Vacations cannot guarantee your preference)

If you have not purchased air through Collette and wish to purchase transfers, you must transfer at our pre-scheduled times.

Room Accommodations: Smoking Non-Smoking (Collette Vacations cannot guarantee your preference)

Collette Vacations accepts American Express, Discover, MasterCard or Visa as payments toward your group reservation.

If paying by credit card, please complete the attached authorization form.

Exploring the Alpine Countries & Oberammergau's Passion Play - 9/1/2010 270574 A2 4/14/2008

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www.ColletteVacations.com

Payment of a per person waiver insurance fee guarantees **full refund** on all payments (including deposit), **except the waiver fee itself**, made to Collette Vacations for tour service in case of cancellation for any reason prior to the day of departure. Air inclusive waiver insurance may be purchased only if you purchase your airline tickets from Collette Vacations.

Once on tour, if a passenger has to return home early due to personal illness, illness or death of a member of the immediate family, (physician's statement required), payment of the waiver fee to Collette Vacations guarantees full refund for any unused land services after departure from the tour. Payment of the air inclusive waiver guarantees your return transportation, with no additional supplement, utilizing your original airline tickets. In the event you have purchased non-refundable airline tickets, the air waiver does not apply.

Waiver insurance is non-transferable and valid for each applicant only. *Waiver Insurance must be purchased at time of deposit.*

Collette Vacations can assume no responsibility for and cannot be held liable for any wrongful, negligent or unauthorized acts or omissions of any travel agent or travel agency other than that of Collette Vacations itself, and its own employees.

The waiver insurance fees do not cover any single supplement charges which arise from an individual's traveling companion electing to cancel for any reason prior to departure. In this case, the single supplement will be deducted from the refund of the person who cancels. Division of this charge between the two passengers involved is solely their responsibility. If insufficient funds are deducted from the canceling client, the traveling client will be charged the remaining portion of the single supplement. The waiver covers cancellation of your trip and does not cover cancellation of the airline portion only.

The waiver insurance fees cover lost, damaged or delayed baggage as well as medical expenses, emergency medical attention and worldwide travelers' assistance. See your booking agent for details.



COLLETTE
VACATIONS

**180 Middle Street
Pawtucket, RI 02860
Phone: 1-888-332-1927 Fax: 1-401-727-9014**

If paying by credit card, please complete this form and return to Wade Travel Agency. We can only charge your credit card for the amount noted if the signature, address and phone number are listed below. Thank you!

CREDIT CARD AUTHORIZATION FORM

BOOKING NUMBER: 270574

TOUR: Exploring the Alpine Countries &
Oberammergau's Passion Play

DEPARTURE DATE: September 1, 2010

GROUP NAME: Wade Travel Agency

Name of Passenger(s): _____

Cardholder Name: _____

Cardholder Address: _____
(as it appears on your credit card statement)

Cardholder Phone: _____

Credit Card Type: ___ American Express ___ Discover ___ MasterCard ___ Visa

Credit Card Number: _____

Expiration Date: _____ Amount to be charged: \$ _____

Cardholder's Signature: _____ Date: _____

I agree to pay according to the card issuer agreement. I understand and accept Collette Vacations cancellation policy, terms and conditions.

Participating credit card companies are now requiring a billing address and phone number for **FRAUD PREVENTION**. All information **MUST** be provided. Thank you for your cooperation!

If using your credit card for payment, please return this Authorization Form by mail to:

Wade Travel Agency
Attn: Denise Rucinski
797 Burdeck St
Schenectady, NY 12306-1297

Or by Fax to: (518) 355-4942