

Terms & Conditions & Insurance Waiver

I understand fully that there are non-refundable expenses involved in preparing for a trip such as the one in which I plan to participate. I have read Global Sojourns' *Terms* & *Conditions* for this trip, noting and accepting the policies regarding trip cancellations and refunds, Global Sojourns' release of liability and my own responsibilities.

It has been *highly recommended* by Global Sojourns L.L.C. that I purchase travel insurance (accident, medical and trip cancellation insurance) appropriate for my entire trip. I am aware that if I have a pre-existing condition I need to purchase a policy before or within a short time (i.e. 10 days) after making the deposit (depending on the specific policies) in order to be covered for that specific condition.

Traveler #1 (name as it appears on passport)	Traveler #2 (name as it appears on passport)
SIGNATURE Traveler #1	SIGNATURE Traveler #1
Parent Signature #1 for Minor	Parent Signature #2 for Minor
	under 18 years of age. "If I am signing on behalf of a fy the entities name above for any claims of the minor."
Date: Indicate one:	I/We do
	I/We do not
	intend to take out a travel insurance policy.
When you obtain travel insurance, please prov	vide us with:
Travel insurance company:	
Policy number:	

If you need suggestions for a reputable insurance company, call us or check out Travel Guard International at www.travelguard.com. The representatives in Travel Guard's World Service Center will be happy to assist you with finding the appropriate policy for your situation. They are available 24/7 at (800) 826-1300. Please provide them with our ID number, 00134576.

Please fax, e-mail (scanned copy) or mail this document to: Global Sojourns L.L.C., 1306 N. Edison Street, Arlington, VA 22205, Fax: (866) 528-7875; E-mail: macy@globalsojourns.com