



Please complete this **reservation form** (one per person) and mail it along with your **\$100 per person deposit** *plus* the **Optional Guest Protection Plan premium** (highly recommended) to:

Destinations with Nadine, Inc., Attn: Nadine Mihaljevic, PO Box 304, Mundelein, IL 60060

For more information contact **Nadine** at **(847) 902-8064**

Please print

Full Name: _____

Exactly as it appears on your government-issued photo identification

Gender: _____ Male _____ Female Birth date (month/day/year): _____

Familiar name or nickname: _____

Street Address: _____

City/State/Zip: _____

Email Address: _____

Phone number (with area code): Home: _____ Cell: _____

Your roommate's name, if applicable: _____

Please indicate room preference: _____ King Bed or _____ Two Double Beds (*King bed cannot be guaranteed*)

Do you require wheelchair assistance in the airport? _____

Do you require a special diet or accommodation? _____

If your anniversary occurs during the trip, please give us the date: _____

Known Traveler Number (if applicable) – for TSA Pre Check at the airports: _____

Please check one: _____ **Double: \$3,788** _____ **Single: \$4,499** _____ **Triple: \$3,580**

Please make checks payable to **Destinations with Nadine, Inc.**

Balance Due: March 4, 2020

Credit cards can be used ***for final payment only*** and will incur a 3% handling fee.

Travel Documents: Starting in 2019, new guidelines for acceptable travel identification may be imposed. It is each traveler's responsibility to make sure that their state-issued photo I.D. is compliant with the REAL ID requirements. See the TSA's website - **www.tsa.gov/travel/security-screening/identification** - for a list of acceptable forms of identification. Destinations with Nadine and Cruises and Tours Worldwide cannot be held responsible for travelers who are not permitted to fly due to non-compliance.

Optional Travel Protection Plan is Highly Recommended. See next page: Travel Protect Plan Prices / info. OVER 

Travel Protection Plan

Outstanding Oregon and Northern California

Please read and consider the information below. Then indicate your preference, sign and submit this form to secure your reservation.

An optional comprehensive travel protection plan with Travel Insured International is offered to you for this trip. You are not required to purchase this plan, but we strongly recommend that you do because it provides certain refund rights in the event you must cancel the trip due to medical emergency or other defined reason. It also provides benefits for medical expenses should you become sick or injured while on the trip as well as coverage for trip delay and trip interruption expenses. Information regarding the travel protection plan, its coverage, exclusions, and limitations is available upon request.

☐ **I accept** the optional Travel Insured Group Deluxe plan and am including the premium with my trip deposit. I agree **Destinations With Nadine, Inc.** is not liable for any losses, financial or otherwise.

GROUP DELUXE:

___ \$290 per person in **double**

___ \$331 per person in **single occupancy**

___ \$290 per person in **triple**

☐ **I decline** the optional Travel Insured Group Deluxe plan and in doing so realize that I may lose all or part of my trip payment if I must cancel after the cancellation date noted on the trip flier. I also realize that I will be 100% responsible for all expenses incurred due to cancelled or delayed flights; if I become sick, injured or die while on the trip; or if I must leave the tour to return home. I will also not have coverage for lost or damaged luggage, additional lodging or meals if delayed or for any unused portion of the tour. I agree **Destinations With Nadine, Inc.** is not liable for any losses, financial or otherwise.

Name: _____ Date: _____

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