

# RESERVATION AND CANCELLATION COMMITMENT FORM

Request for Travel to: \_\_\_\_\_ Travel Dates: \_\_\_\_\_  
Total Trip Cost: \_\_\_\_\_ Circle applicable AIR-HOTEL-CAR, # or Participants \_\_\_\_\_

Traveler's Names: (as they appear on Government Issued ID)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Independent travel commitment

**Reservations** will be made based on the information above and an attached itinerary as requested. Reservations will be completed and payment MAY require to be made by credit card. Payments made by check must be payable to [Cordially Yours Travel](#) and sent to: [Cordially Yours Travel](#), 4400 Duncan Hill Rd. Rescue, CA 95672 Attn: Accounting.

Reservation made for **short notice travel** (less than 2 weeks) will require an additional non-refundable service fee of \$25.00 per booking, payable at time of deposit. Cancellations of Short Notice Air/Car/Hotel bookings will be 100% non-refundable. ALL cancellations must be received in writing.

Reservations made for **advanced notice bookings** the following policy prevails: [Cordially Yours Travel](#) must be notified on or before \_\_\_\_\_ for a full refund less an administration fee of \$25 per person. Cancellations made before \_\_\_\_\_ will be subject to a penalty of \$50. Any cancellations made after \_\_\_\_\_ will receive no refund. All cancellations must be received in writing.

**Travel insurance is strongly recommended** Insurance waiver: **Yes** \_\_\_ please add cancellation insurance to my booking **No** \_\_\_ I do not wish to carry cancellation insurance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Travel Documents:** I understand that a Valid passport or proof of citizenship, such as a government-issued certified birth certificate with a raised seal and/or a driver's license or government-issued photo I.D. is required to travel whether Domestically or Internationally, and in some cases a VISA is required. **It is the responsibility of the traveler to have the property identification for domestic and international travel with them during their travels.**

**I have read and agree to the terms and conditions.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Credit Card Information:

**Card Type:** Visa, Master Card, American Express (*circle one*)

**Card Number** \_\_\_\_\_ **Expiration** \_\_\_\_\_ **Code** \_\_\_\_\_ (on back)

**Name on Card:** \_\_\_\_\_ (authorized user)

**Billing Address:** \_\_\_\_\_

**Amount to be charged:** \_\_\_\_\_ [If Service Fees apply they will be noted]

For any questions do not hesitate to contact [Cordially Yours Travel](#) by calling: **530-676-7430** TOLL-FREE: **1-866-877-8747** (TRIP) OR e-mail to: [cytravel@inreach.com](mailto:cytravel@inreach.com)

Visit our web-site at: [www.cordiallyyourstravel.com](http://www.cordiallyyourstravel.com)

CST #1013939-40