



CANCELLATION AND LIABILITY WAIVER
TO RECEIVE DOCUMENTS THIS FORM MUST BE SIGNED AND RETURNED
betty.stein@exceptionaltraveladventures.com

Exceptional Travel Adventures and agent, Betty Stein and/or suppliers of services pursuant to or in connection with these itineraries shall act only as agents of the tour members in making arrangements and conducting tours for hotels, transportation, sightseeing, entertainment, tour guiding or any other service do not assume any liability whatsoever for any injury, damage, death, loss of/from accident or delay to person or property due to an act of negligence of /or default of any hotel, carrier, company or person render any of the services included in the tour or by act of G-d. Exceptional Travel Adventures is not responsible for price increases imposed by the event coordinators/tour operators and/or service providers and is not responsible for the neglect or omission of suppliers or carriers. It is understood that Exceptional Travel Adventures is not responsible in any way for the health or safety of any traveler, and it is their sole responsibility to manage their affairs and take every precaution to insure their safety and health while traveling. These agents are also not liable for any damage or loss of baggage. Further, no responsibilities are accepted for any damage or delay due to sickness, pilferage, labor disputes, local laws, war, machinery breakdown, weather, or other causes beyond their personal control. The payment for a reservation on the trip shall constitute consent to all provisions as described on the registration form.

Travel insurance is Imperative! Reservation will only be considered complete & insurance policy in effect only after this disclaimer is signed and received by Exceptional Travel Adventures.

A \$75.00 non-refundable administrative/consultation fee is collected prior to booking your trip. Air packages, air tickets and cruise requirements are subject to cancellation policies imposed by the airlines or the cruise company.

I have read and accept these terms and conditions.

Signature

Date

I **accept** travel insurance _____

I **decline** travel insurance _____

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