

Mater Dei Tours TM

Shrines of **Canada** with Fr. Eric Sternberg

August 13th to the 23rd, 2009



**YOUR NAME MUST BE PRINTED AS IT APPEARS ON YOUR PASSPORT
or HOW IT WILL APPEAR ON YOUR PASSPORT APPLICATION.**

1st Passenger Information

Last Name as on passport (or passport application) ▲										First Name as on Passport ▲										Middle ▲	
Address ▲										City ▲					State ▲					Zip ▲	
Gender ▲		Date of Birth ▲			Place of Birth (i.e.: Wisconsin) ▲					Phone Number(s) ▲											
Passport Number (or applied for) ▲					Date of Issue ▲					Date of Expiration ▲					Country of Issue ▲						
Emergency Contact ▲			Daytime Number ▲					Evening Number ▲					Your Dietary Restrictions ▲								
Special Requests (diets, disabilities, notes, needs, special request, etc.) ▲																					

2nd Passenger Information ***** for 3rd and 4th person in one room simply photocopy application**

Last Name as on passport (or passport application) ▲										First Name as on Passport ▲										Middle ▲	
Address ▲										City ▲					State ▲					Zip ▲	
Gender ▲		Date of Birth ▲			Place of Birth (i.e.: Wisconsin) ▲					Phone Number(s) ▲											
Passport Number (or applied for) ▲					Date of Issue ▲					Date of Expiration ▲					Country of Issue ▲						
Emergency Contact ▲			Daytime Number ▲					Evening Number ▲					Your Dietary Restrictions ▲								
Special Requests (diets, disabilities, notes, etc.) *** If rooming with a 3rd and 4th person, please write the names here and fill out a new page ▲																					

Insurance

Travel Guard Insurance must be either declined below or accepted on the following page by adding it to your deposit.

The premium for the Travel Guard/AIG insurance is in addition to the trip cost.

This insurance must be purchased within 15 days of registration and initial trip deposit in order to cover pre-existing medical conditions.

If you sign up within 21 days from sending your trip registration, the Vacation Travel Protection Plan Includes (call Travel Guard/AIG for full details of policy)

Tour Cost – Trip Cancellation & Interruption
\$750 – Trip Delay (\$150 maximum per day)
\$500 – Missed connection
\$1000 – Baggage & Personal Effects
\$300 – Baggage Delay
\$50,000 – Medical Expense

\$300,000 – Emergency Medical Transportation
\$25,000 – Accidental Death & Dismemberment
Included – Travel Medical Assistance & Worldwide Travel Assistance
Included – Live Travel Emergency Assistance
Included – Concierge Services
Included – Identity Theft Services

INSURANCE INSTRUCTIONS (PLEASE READ)

If you wish to decline the Travel Guard insurance, then please sign your name on the box on the right. If you wish to sign up for insurance, please ignore the signature box on the right and simply add your insurance cost on the next page.
 (Additional cost **\$110 to \$138** per person - see next page)

I DO NOT WANT TRAVEL INSURANCE (Please sign below)

Signature Passenger #1

Date

Signature Passenger #2

Date

With my above signature I **decline** Travel Guard Insurance.

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Tour Pricing

Tour Detail	Cost per passenger	# passengers	Total
Basic Tour Package from Madison, Milwaukee or Chicago: Price per person based on double occupancy, sharing room with another passenger (2 people in 1 room).	\$1,981	X	\$
Taxes and Fees: Hospitality, and all local, doemsti and foreign sales taxes (ALL INCLUDED)	INCLUDED	X	
Optional Single Room Supplement: Single room occupancy, one private room per person * (room availability is very limited)	+ \$718	X	\$
Optional Triple Room Discount: A per person discount offered when 3 people are sharing 1 room with existing bedding (2 double beds in the room) * (room availability is limited & all roommates must be provided for the triple option)	- \$100	X	\$
Optional Quadruple Room Discount: A per person discount offered when 4 people are sharing 1 room with existing bedding (2 double beds in the room) * (room availability is limited & all roommates must be provided for the quad option)	- \$200	X	\$
Please select (check) departure city: MADISON <input type="radio"/> MILWAUKEE <input type="radio"/> CHICAGO <input type="radio"/>			
Optional Travel Guard Insurance: A \$5 processing fee from Travel Guard is included, Price applies only to double, triple and quadruple occupancy pasengers. *(Add \$28 more for single occupancy passengers). Skip this step if you declined insurance by signing on the bottom of the first page.	\$110*	X	\$

Total Cost of Package ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$

Required Deposit is \$500.00 per person. Insurance Must be Declined on Registration Form or it will automatically be added.	Deposit of \$500 per person + plus Insurance Or Final Payment (Registration deadline 6 July 2009 or while space lasts):	\$ <i>advance payment you wish to pay today</i>
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Payment Information:

Make Checks or Money Orders Payable to: <u>Landa Cleary Travel Co., Inc.</u>	Mail Payments and Reservations to: Landa Cleary Travel Company, Inc. P.O. Box 323 Waunakee, WI 53597 Or you may fax to: 1 608 849 4247
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Credit Card Payments:

CARD HOLDER'S NAME (PLEASE PRINT): ►

MasterCard or Visa	MM / YYYY	Last 3 digits in signature box
Credit Card Type ▲	Credit Card Number ▲	Expiration Date ▲ 3 Digit Security Code on back of card ▲
Your Billing Address ▲ (where the credit card sends you your bill)		City ▲ State ▲ Zip ▲

Please check mark:

Yes **I have received, read, understand and agree to the Terms and Conditions of this tour.**

No

X **CARD HOLDER'S SIGNATURE** (I agree to pay according to terms & conditions)

X _____ Signature of Traveler #1	_____ Date	X _____ Signature of Traveler #2	_____ Date
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With my signature above, I declare that all persons listed on this reservation form have read, understand and accept the terms and conditions of this tour. I declare that I am in good physical health and am able to travel without assistance unless I provide a full time assistant at my own expense. I understand that this pilgrimage may require walking (sometimes from 1 to possibly as many as 3 miles in one visit).