Travel Committee Trip Disclosure Form

Incomplete forms will NOT be processed!

This form clarifies the policies of ILR and the commitment of the trip participant(s)

Pennsylvania Dutch Country Trip, Lancaster, PA
”Hershey Chocolate World” “Bird in Hand” “Sight and Sound Theater”

Two nights: Tuesday & Wednesday, September, 24-25, Returning the 26th

Sign-up Deadline: Monday, July 8, 2019

45 participants

If interested in this outstanding trip, do not wait until the sign-up deadline to submit paperwork. Spaces are filled in the order of receipt and completion. Once the maximum (45) is reached, a numerical wait list is kept based on submission date of completed paperwork. If you are traveling with a friend, make certain that your paperwork is submitted simultaneously, otherwise travel for both is not guaranteed.

To secure your reservation/s for this ILR Member Trip, return this signed Trip Disclosure form, Traveler Questionnaire form, Check, payable to ILR.

Please initial each statement below. If a couple (i.e. husband and wife) is traveling together, both need to initial and sign this document. Copy for your records.

_____ ILR reserves the right to cancel a trip if the minimum numbers are not met. Money will be refunded.

_____ If a member cancels after the Sign-up Deadline (July 8, 2019) and a replacement from the wait list is secured, a full refund is issued.

_____ If a member cancels after the Sign-up Deadline (July 8, 2019), and there is NO wait list, ILR does not issue refunds; however, the member may secure his/her replacement with an ILR member, making financial arrangements with the replacement and notifying the ILR office no later than September 1, 2019.

_____ Wait List Policy: If you are on the wait list, ILR will notify you as cancellations are received. Those who are still on the wait list at the time of the trip will be issued a full refund.

_____ Primary communication with trip participants will be by e-mail. On day of travel by text/phone.

Signature/s: PLEASE PRINT LEGIBLY AND SIGN

PRINTED NAME

______________________________  Signature  ___________________________  Date __________

______________________________  Signature  ___________________________  Date __________

Office Use Only: Date Rec’d ______________ Trip $ Pd ______________  Ck. No. ______________
**ILR PENNSYLVANIA DUTCH COUNTRY TRIP TO LANCASTER**

*Sept 24-26, 2019 (Tuesday – Thursday)*

**Traveler Questionnaire** (information and meal choices)

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Complete **one form for each trip participant** (including those rooming together) and **submit all paperwork together**.

**Printed Name:** ____________________________

**Legibly PRINT Email Address:** ____________________________

**Phone:** Home: ___________________         Cell: ___________________

**YES   NO** Is it okay to leave messages on answering machine/voice mail?

**ROOMING CHOICE.** Choose One:

___ I want a single room. $555.00

___ I want to share a room. $420.00 each person. Please turn this form in at the same time as roommate.

   Roommate name (print): ____________________________

…Any **Traveler who is unable to be self-sufficient must be accompanied by a traveling companion.**

**Drinks with screw tops only please** on bus. No **pop-top cans or glass containers. Personal food must be in a plastic bag.**

**Day 1 Lunch** - Main Street Market in Smyrna, Delaware

Please choose one of the following: *

___ Turkey: Turkey breast and your choice of American, Swiss or Provolone. (Please **circle** type of cheese desired)

___ Ham: Ham and your choice of American, Swiss or Provolone. (Please **circle** desired cheese)

___ Roast Beef: Roast Beef and your choice of American, Swiss or Provolone. (Please **circle** desired cheese)

___ Italian: Salami, Capicola, Ham and Provolone cheese.

___ Gluten-free option is on lettuce instead of bread.

*All sandwiches come with chips, side of fruit, dessert and water.

**Circle One**

**YES   NO** Will you be a volunteer photographer for the ILR website/archives?

**YES   NO** Will you write a summary of our trip experience for the ILR website?

**Adult beverages can be purchased at individual traveler’s expense. No alcohol provided on bus.**

**Emergency Contact information. We cannot process this form without this information.**

   Emergency Contact Name: ____________________________ Relationship __________________

   Emergency Contact phone number/s: ____________________________

**Gratuities included in the cost of the trip: bus driver, tour guide and dinners. Additional “gifts” for hotel staff are a personal choice.**

**Questions?** Please contact one of the Travel Committee members listed below, **not the ILR Office**

Margie Cole  psycemom0604@yahoo.com  757 426-3803   Denise Kusturin  dkusturin@verizon.net  757 426-2080

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