

# RESERVATION FORM:

JOHNS HOPKINS UNIVERSITY - KENTUCKY

15NAL1023/JHU

Enclosed is my deposit for \$ \_\_\_\_\_ (\$200 per person) to hold \_\_\_\_\_ place(s) on the Bourbon and Horses Tour of Kentucky departing on October 23, 2015. Cost is \$895 per person, land only. Optional Galt Hotel package is \$510 per person based on double occupancy and \$850 per person based on single occupancy. Cost of main (\$895) and optional Galt Hotel Package (\$510/850) is \$1,405 per person double occupancy/\$1,745 per person single occupancy.

Final payment due date is **August 19, 2015**.

Please make check payable to CLASSIC ESCAPES and send to 58-25 Queens Boulevard, Woodside, NY 11377

OR

Charge deposit to:  MasterCard  Visa  American Express  Discover

(Attached Credit Card Authorization form needs to be completed and faxed to the Classic Escapes at 718-204-4726)

Deposits can be made by credit card; however, all final payments can be made by check or money order.

1) NAME (As appears on passport):  Mr.  Mrs.  Ms. \_\_\_\_\_ Date of Birth (M/D/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_

2) NAME (As appears on passport):  Mr.  Mrs.  Ms. \_\_\_\_\_ Date of Birth (M/D/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_

NAME FOR NAME BADGE IF DIFFERENT FROM ABOVE: 1) \_\_\_\_\_ 2) \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONES: HOME: ( ) \_\_\_\_\_ OFFICE: ( ) \_\_\_\_\_ MOBILE: ( ) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

I certify that I have not recently been treated for, nor am I aware of any physical or other condition or liability that would create a hazard to myself or the other members of this tour.

### OPTIONAL ACTIVITIES:

I wish to purchase the optional hotel package at the Galt House Hotel. The cost is \$510 Per Person based on double occupancy and \$850 based on single occupancy. I require a  DOUBLE  TWIN  SINGLE Room (Make one selection only).

I am sharing with \_\_\_\_\_ (form sent separately)

I need assistance in securing a roommate. I understand if John Hopkins University or the tour operator cannot locate one for me by final payment date, I agree to pay for the single room. I prefer to share with:  Smoker  Non-smoker

I require roundtrip transfers from the airport to the Galt House Hotel. There will be \_\_\_\_ members in my party. (\$100 per vehicle of 6, each way)

Please make my/our round trip air reservations from \_\_\_\_\_ (please indicate desired city of departure)

Please send me information on air upgrades for:  Business

Airline Seating Preference  Aisle  Window Frequent Flier # \_\_\_\_\_

*\*\*We can request a seating preference on your behalf, however this is only a request and NOT guaranteed, as some seating assignments may be airport check-in only. Requests should be made in writing no later than 60 days prior to departure. Bulkhead and/or emergency row seats can only be requested at airport check-in on the day of departure. Also note that even if we do obtain your preferred seat, it is not guaranteed that the seat will be provided during check-in as there might be equipment changes that nullify our selection.*

I/We will make own air arrangements and will provide you with an itinerary before trip departure.

All rates quoted are based on tariffs in effect as of June 24, 2015, and are subject to change. Cancellation penalties are applicable as outlined on Conditions of Travel. **WE STRONGLY RECOMMEND THAT YOU OBTAIN TRAVEL INSURANCE. RESERVATIONS ARE ACCEPTED SUBJECT TO TOUR CONDITIONS AND WILL BE CONFIRMED ONLY IF ACCOMPANIED BY COMPLETED FORM SIGNED BY THE TOUR PARTICIPANT(S).**

Please contact Classic Escapes at (718)280-5000 with questions regarding this tour. For questions regarding Johns Hopkins, please call 800-JHU-JHU1 (548-5481) or Email: [travel@jhu.edu](mailto:travel@jhu.edu)

Note: A small portion of the cost of your trip supports the Johns Hopkins Alumni Travel Program.

Eligibility: At least one member of the traveling party is required to make a sustaining financial contribution of \$50 or more to the Johns Hopkins Alumni Association within the fiscal year. Please visit [alumni.jhu.edu/support](http://alumni.jhu.edu/support)

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Classic Escapes  
58-25 Queens Boulevard, Woodside, NY 11377  
(We recommend that you keep a copy of your selections as noted above for your future reference)

JOHNS HOPKINS UNIVERSITY KENTUCKY  
OCTOBER 23 TO 27, 2015



### CREDIT CARD PAYMENT AUTHORIZATION

*Please Note: If you wish to charge your deposit to Visa, MasterCard, American Express or Discover, this authorization form MUST be completed and returned to us along with your reservation form before we can process your application.*

I authorize (**Classic Escapes Inc.**) to charge my VISA/MASTERCARD/AMERICAN EXPRESS/ DISCOVER listed below:

Name appearing on credit card \_\_\_\_\_

Card number \_\_\_\_\_ Expiration date \_\_\_\_\_

Card Verification Number\* \_\_\_\_\_ Card Type \_\_\_\_\_

Billing address of credit card \_\_\_\_\_

Amount of transaction \_\_\_\_\_ Invoice # \_\_\_\_\_

Services rendered/Items purchased \_\_\_\_\_

Phone number \_\_\_\_\_

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

**\*How To Locate Your Card Verification Number:**

**(Visa, MasterCard, and Discover:** Locate the credit card number on the back of the card above the signature box. Enter the 3 digit number which follows the credit card number. **American Express:** The 4 digits on the right hand side of the card, above the end of the credit card number.

Refund of deposit is not possible. Cancellation charges levied are based on the following schedule:

- Up to 65 days prior to departure, departure is forfeited.
- 64-45 days prior to departure: 50% of the tour cost.
- Less than 45 days prior to departure: 100% of the tour cost.

PLEASE NOTE: At times, our bank requires photocopy of credit card (both sides) and driver's license or document showing signature of cardholder, in order to process the charge. While it is not required at this time that you include these materials with your deposit, if our bank requests it, we will contact you for these copies.