



**>>> Please type or print CLEARLY in ink <<<**  
**and read and sign the Agreement & Release on the reverse,**

*Submit by Mail or eMail to [info@grouptoursinc.com](mailto:info@grouptoursinc.com)*

Tour Name \_\_\_\_\_ Tour Dates \_\_\_\_\_

Group/School Name \_\_\_\_\_

Teacher or Group Leader \_\_\_\_\_

TRAVELER TYPE:  Student  Adult Participant (>18 yrs)  Group Leader/Chaperone

NAME \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE, IF ON PASSPORT)

Address \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

Phone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Traveler Email (for correspondence) \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

Date of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_ Gender:  Male  Female

***If traveler is under 18 years of age, please complete below ~***

Parents/guardians Name \_\_\_\_\_  
(LAST) (FIRST)

Phone (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work) \_\_\_\_\_

Address (if different) \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

Alternate Emergency Contact & Phone: \_\_\_\_\_

Please indicate any health conditions or concerns (e.g., allergies, medications, etc.): \_\_\_\_\_

**Dietary Restrictions** (Vegetarian, Vegan, Gluten Free, etc): \_\_\_\_\_

Primary Physician \_\_\_\_\_ Phone \_\_\_\_\_

Health insurance company & policy number: \_\_\_\_\_

*\*If health insurance information is left blank, proof of coverage or other travel insurance will be required at least 30 days prior to departure.*

***Payment/Billing Information ~***

Amount of Deposit Enclosed: \$ \_\_\_\_\_ (Refer to Preliminary Itinerary for amount required)

**Deposit Method (check one below):**

- Check/Money Order - Payable to Group Tours, Inc. with traveler's name and tour # in the memo
- Cash - Attach at your own risk ONLY if approved by your group leader in a sealed, labeled envelope
- Credit Card - accepted online at [www.grouptoursinc.com](http://www.grouptoursinc.com) or by phone (please call 1-800-724-8747)

**Please Send Invoices By:**  Email (to email address below\*)  Regular Mail (USPS)

**Parent/Adult Email Address\*** \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

*\*Please note, invoices will be sent to this address unless "Regular Mail (USPS)" is checked above*

***Do not write below this line, for OFFICE USE ONLY***

DATE RCVD \_\_\_\_\_ DEPOSIT RCVD \_\_\_\_\_ RCVD BY \_\_\_\_\_ CLEARED/COMPLETE \_\_\_\_\_



# Cultural Connections Group Tours Incorporated

# AGREEMENT & RELEASE

*Cultural Connections Group Tours is the International Tour Division of Group Tours Incorporated.*

**Every traveler (including adult participants and teacher/chaperones) must read, sign, and submit this Agreement & Release prior to tour departure. Please keep a copy of this document for your records.**

1. I, the undersigned, whose name/signature appears on the bottom of this form (and my parent or guardian if I am a minor), a registrant for a trip with Group Tours Incorporated hereby acknowledge that I have read and agree with the terms (including payment, cancellation and refund policies) and conditions of Group Tours Incorporated 'Price, Registration & Terms' and also my preliminary itinerary, as well as those contained below, and acknowledge that they form part of my agreement with Group Tours Incorporated.
2. I hereby waive and release Group Tours Incorporated, its affiliates, agents, directors, officers, employees, group leaders and group organizers, including any person or entity employed or utilized by Group Tours Incorporated or host schools in any foreign country from all claims arising from any injury, loss, damage, accidents, delay, or expense resulting from events beyond its control, including without limitations, acts of God, war, strikes, incidents of politically-motivated violence, sickness or quarantine, government restrictions or regulations, and, in the absence of its own gross negligence, arising from the use of any vehicle or from Group Tours Incorporated selection of, or from any act or omission by, any host family, bus or car rental agency, airline, railroad, taxi or tour service, hotel service, hotel, restaurant, school, university, or other firm, agency, company or individual.
3. I agree that if I become ill or incapacitated, Group Tours Incorporated and my group leaders may without incurring any liability take such actions as they consider necessary under the circumstances, including securing medical treatment for me and transporting me home all at my own expense. I agree to release Group Tours Incorporated and my group leaders from any liability for the quality and timeliness of any such medical care received or for any expenses incurred. I understand that Group Tours Incorporated shall distribute to me through my teacher (if applicable) written rules and regulations concerning my behavior while on the trip. I understand that Group Tours Incorporated cannot accept responsibility for students not following these rules and regulations, and that I may be sent home at my own expense without benefit of any refund if I do not adhere to Group Tours Incorporated rules and standards and the instructions of my teacher. I understand that if I am expelled from school or otherwise disciplined by school or civic authorities, I may be declared ineligible for the trip and my participation cancelled, subject to the refund policies outlined in Group Tours Incorporated Cancellation & Refund Policy.
4. I will indemnify Group Tours Incorporated, its affiliates, agents, directors, employees, group leaders, and (if applicable) my teacher, school, and school officials and hold them harmless for any financial liability or obligation which I personally incur, or injury or damage to the person or property of others which I cause or contribute to, while participating in any part of a Group Tours Incorporated tour program.
5. I understand that Group Tours Incorporated reserves the right to reassign participants a replacement teacher/group leader should the original teacher/group leader not participate in the program for any reason.
6. I understand that the air carriers' liability for loss or damage to baggage, or for death or injury to persons or property is limited by their tariffs and/or the Warsaw Convention and related agreements. Further, I understand that the air carriers assume no responsibility during such time that I am not on board their aircraft.
7. I understand that future publicity material of Group Tours Incorporated may include statements made by participants or their photographs, and I consent to such use of my comments or photographs.
8. I understand that I am responsible for exercising caution and common sense at all times to avoid accidents and injuries. I understand that Group Tours Incorporated will provide information to all participants on optional travel insurance that will cover travel on a Group Tours Incorporated tour. I understand that it is my responsibility to purchase this insurance, or a comparable type of insurance, and Group Tours Incorporated bears no responsibility for refunds beyond its published Cancellation & Refund Policy. I understand I will be required to return, prior to my tour departure, an Insurance Acknowledgement Form, and indicate to Group Tours Incorporated whether or not I have purchased travel insurance, and if so with who and when. If I decline to purchase the travel insurance, I will do so understanding the risks, responsibilities, and possibility for financial loss and additional costs that may be incurred by myself personally.
9. I understand that Group Tours Incorporated reserves the right to make changes in the tour schedule if deemed necessary, and also in the tour prices as outlined in the preliminary itinerary. Program prices are based on currency exchange rates, air fares, and taxes in effect at the time the prices are published. In the event any of these cost items experiences drastic changes (>10% fluctuation), Group Tours Incorporated reserves the right to pass some or all of this cost increase along to the individual travelers in the form of a price supplement. In such a rare event, Group Tours Incorporated bears no liability for refunds unless such price changes exceed 5% of the program price, at which time participants can cancel in writing within 10 days of notification and receive a full refund.
10. If your local municipality, school, school board, school administration, or similar group is officially sponsoring this trip, you will receive written notification from them, together with a statement of any responsibility for the trip assumed by that organization. In the absence of such a written notification, you should be aware that the trip is not officially sponsored or supported by your municipality or your school system, although they may, as a courtesy to the teacher involved, allow school or municipal premises or services to be used in connection with planning for the trip. Therefore, your local school, school board, school administration, school officials, municipality and municipal officials have no liability or responsibility whatsoever with respect to the trips unless they expressly inform you otherwise in writing, and by going on a Group Tours Incorporated trip you expressly release and waive all claims of any type against any or all of the foregoing in any way related to, or arising out of the trip.
11. I understand that I may request in writing a specific alternate return flight date in order to return independently from the group and that Group Tours Incorporated will bill me a service charge plus any additional airline charges if I select this option. Full flight and date details along with a parental permission letter must be received by Group Tours Incorporated at least 90 days prior to departure. Otherwise, I understand that if I wish to alter flight arrangements from scheduled program dates, I must plan to make my own domestic and international flight arrangements. All participants flying independently from the group must make their own ground transportation arrangements to and/or from their departure or arrival airport. All changes must be submitted to Group Tours Incorporated in writing. The airline used for an alternate return is at the discretion of Group Tours Incorporated. Confirmation of special flight arrangements are subject to availability and will normally be made within 30 days of departure.
12. It is the responsibility of each traveler, or parent or guardian if the traveler is a minor, to determine the suitability of a particular teachers/group leaders to chaperone his/her child. Also, travelers, and/or parents/guardians are obligated to make the teacher/group leader aware of any special health concerns or needs. Likewise, a group leader has the right to deny any traveler's participation in the tour if the group leader determines that the special needs of that individual will interfere with the group leaders duties and responsibilities to the rest of the group.
13. If applicable, I take full responsibility to obtain a U.S. Passport, all visas and other required documents in order to enter all countries on my itinerary. If I am not a U.S. citizen, I agree to contact the local consular offices of the countries I will be visiting to obtain necessary visas. I also understand that a failure on my part to obtain the necessary documents for participation in the program does not constitute grounds for cancellation with a refund. I do understand that a company representatives will be available to me for guidance and assistance in these matters, but are in no way obligated or responsible for obtaining these documents.
14. This agreement will be effective when my application and deposit are received, deemed complete, and therefore accepted by Group Tours Incorporated and shall be governed by the laws of the State of New York.
15. This agreement cannot be modified except in writing by Group Tours Incorporated. Please be sure that the appropriate signatures of the student and the parent or legal guardian appear on the bottom of this form before it is submitted.

Signature of Tour Participant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian\* \_\_\_\_\_ Date \_\_\_\_\_

*\*Required if the tour participant is under 18 years of age*