

MASON CITY CHAMBER OF COMMERCE
THE LAND OF THE PHARAOHS - THE PYRAMIDS, LUXOR, ASWAN,
VALLEY OF THE KINGS, CAIRO, AND THE RIVER NILE

Group
Booking #: B001959

November 9-17, 2016

PLEASE PRINT— NAMES MUST BE LISTED AS THEY APPEAR ON YOUR PASSPORT

To register for this trip, please complete the form below and e-mail it with a clear copy of your passport information page to Allyson Krull at akrull@masoncityia.com or fax to (641) 423-5725. Reservations can also be made on our online booking engine www.centralholidayswest.com/booking. The group booking code is: B001959

Passenger 1: _____ Date of Birth: _____ M / F
First Name Middle Name Last Name

Passport#: _____ Country of Issue: _____ Date issued: _____ Expiration date: _____

Passenger 2: _____ Date of Birth: _____ M / F
First Name Middle Name Last Name

Passport#: _____ Country of Issue: _____ Date issued: _____ Expiration date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Home Ph#: _____ Business/Cell Ph#: _____

Yes Please reserve me in a single room (limited availability)

Notes: _____

OPTIONALS:

SOUND AND LIGHT SHOW AT THE PYRAMIDS: \$49 PER PERSON ____ YES; ____ NO HOW MANY: ____

ALEXANDRIA EXTENSION: DOUBLE OCCUPANCY \$599 PER PERSON / SINGLE OCCUPANCY \$798 ____ YES; ____ NO HOW MANY: ____

A minimum of 20 passengers are required to operate the Alexandria extension. The Alexandria extension must be reserved and paid for at the time of reservation.

TRAVEL PROTECTION (HIGHLY RECOMMENDED):

I want Trip Cancellation & Interruption Insurance: Yes No

The policy price is based on the total cost of the tour, including taxes. Insurance premium for trips \$2,500 to \$3,000 per person is: \$237, for trips \$3,001 to \$3,500 per person is: \$277, for trips \$3,501 to \$4,000 per person is: \$317 (The premium is calculated on base program and any optional tours)

Central Holidays strongly recommends protecting your investment with our optional travel insurance. The premium must be paid with your initial deposit or within 15 days of your initial deposit/payment for your trip to qualify for the preexisting conditions policy. The policy (without preexisting conditions) can be purchased all the way to final payment but not afterwards.

PAYMENT METHOD & REQUIREMENTS:

Deposit: \$500 per person at the time of registration, plus any optional tours or optional travel insurance. I am including payment for _____ people.

Reservations are on a first come first served basis. Please sign up early to secure your place.

Final payment is due: July 31, 2016

Checks: Make checks payable to Central Holidays West and send to: Mason City Chamber of Commerce - 9 N Federal Avenue, Mason City, IA 50401

Credit Card: Discover Visa MasterCard Amex

Credit Card# _____ Security code#: _____ Exp. date: _____

Name that appears on the card: _____ Signature: _____

I authorize \$_____ to be charged to my card (including optional tour/extension and insurance premium if applicable).

CANCELLATION POLICY:

Cancellations with more than 90 days prior to departure 10% of total cost per person (or a minimum of \$325 per person) is retained

Cancellations between 89 and 46 days prior to departure: 30% of total cost per person is retained

Cancellations between 45 and 31 days prior to departure: 50% of total cost per person is retained

Cancellations between 30 and 15 days prior to departure: 75% of total cost per person is retained

Cancellations 14 days or less prior to departure, or no show: 100% of the package price is retained

Note: A person becoming a single as a result in the roommate's cancellation must pay the single supplement.

I have read the schedule of activities for the Mason City Chamber of Commerce - Egypt program - November 9-17, 2016 and accept the terms and conditions outlined on our website www.centralholidayswest.com/terms

Signature: _____ Date: _____