

RESERVATION FORM

Traveler #1

Mr. / Ms. _____

Address _____

City/State _____ Zip Code _____

Mobile phone _____ E-mail address _____

Birthdate (mm/dd/yyyy) _____ *(required for AFMSP insurance)*

Passport Number _____ Country of issue _____

Health Insurance Provider _____ ID Number _____

Please include a photocopy of your valid passport and health insurance card with this completed form.

Additional information about you:

● Do you have any physical concerns or limitations that may pose challenges to climbing the stairs to the Mont-Saint-Michel Abbey? What can be done to assist you and make this visit more comfortable?

● Do you suffer from motion sickness? _____

● Do you have any food intolerances, allergies or dietary restrictions? _____

● At the time of publication of this trip, France is requiring that US visitors be vaccinated from COVID-19. Are you fully vaccinated?

Yes, I received the following vaccine on (please indicate type and dates):

No. (If you are not vaccinated against COVID-19, your entry to France will be refused.)

● Which part of the trip are you most looking forward to? _____

If this is a reservation for one person, please indicate:

I plan to share accommodations with _____

I wish to have single accommodations and agree to pay the \$700 single supplement.

I'd like to know about possible roommates male female

Traveler #2 – please leave blank if travelling solo

Mr. / Ms. _____

Mr. / Ms. _____

Address _____

City/State _____ Zip Code _____

Mobile phone _____ E-mail address _____

Birthdate (mm/dd/yyyy) _____ (*required for AFMSP insurance*)

Passport Number _____ Country of issue _____

Health Insurance Provider _____ ID Number _____

Please include a photocopy of your valid passport and health insurance card with this completed form.

Additional information about you:

● Do you have any physical concerns or limitations that may pose challenges to climbing the stairs to the Mont-Saint-Michel Abbey? What can be done to assist you and make this visit more comfortable?

● Do you suffer from motion sickness? _____

● Do you have any food intolerances, allergies or dietary restrictions? _____

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I plan to share accommodations with _____

I wish to have single accommodations and agree to pay the \$700 single supplement.

I'd like to know about possible roommates male female

ELIGIBILITY AND RESERVATIONS

All participants must be at least 21 years of age, and able to walk some distance. Reservations will be taken by Alliance Française on a first-come, first-served basis. Total participation is limited to 20 people.

The price for the Normandy Brittany tour is \$3,900 per person (Single Supplement: \$700).

DEPOSIT INFORMATION

To sign up, please complete a Registration Form and submit it with a \$1,000 deposit to Alliance Française, before September 15, 2021. The payment schedule for remaining balance is as follows: \$2,000 (\$2,700 with Single Supplement deposit) is due no later than Monday, November 1, 2021; the remaining \$900 must be paid no later than Monday, December 6, 2021. Please review the full cancellation statement. The deposit will be processed as soon as we receive the necessary forms from you. (see below)

Enclosed is my check, payable to Alliance Française.

Charge my deposit to my Visa MasterCard American Express

Card # _____

Expiration Date _____

Security code (in signature box) _____

AUTHORIZED CARDHOLDER SIGNATURE

DATE

Please mail completed form to Alliance Française Mpls/St Paul
Att: Christina Selander Bouzouina, 227 Colfax Avenue North, MN 5540

CANCELLATION AND REFUND POLICY

If you cancel prior to November 1, 2021, Alliance Française will refund your deposit, less a \$400-per-person cancellation fee. No refunds for participant cancellation will be made after November 1, 2021.

All participants must sign and return Waiver and Release of Liability forms, which will be sent to you after we receive the deposit and completed reservation form. Reservation will be considered complete once Alliance Française has received these signed forms.

Alliance Française reserves the right at all times to cancel all or part of the tour and refund appropriate monies paid by the participant, without further liability. For this reason, we strongly encourage participants to not make non-refundable travel reservations until we have confirmed that the tour will take place.

If you have questions about the trip, please contact:

Christina Selander Bouzouina, directeur@afmsp.org or 612 332 0436