




Stone Cities Guided by Kathleen Morgan
Explorers World Travel, Inc.

Reservations Form (EWT423)

Complete and sign this form. You must sign twice: for credit card authorization below, and at the bottom of Page Two. You may scan and email both pages to sales@ewtravel.com; you may fax both pages to 815-776-0357; or you may mail both pages to: EWT, Box 6027, Galena, IL 61036. Reservations are processed when funds are received.

Enclosed is my/our deposit for \$ _____ (\$500 per person) for :

- Egypt & Jordan*, November 5-16, 2010; \$5120
- Ethiopia & Egypt*, October 31 - November 13, 2010; \$5890
- Ethiopia, Egypt & Jordan*, October 31 - November 16, 2010; \$6590

  	Number on Credit Card: _____
Name Exactly as Appears on Credit Card: _____	
Exact Billing Address of Card: _____	
Expiry Date of Card: _____ Phone Number Registered with Card: _____	
Your signature below authorizes us to debit your specified credit card for \$ _____ in accordance with the <i>Terms & Conditions</i> on Page Two. Do not sign below until you have read and fully accept the <i>Terms & Conditions</i> .	
Signature of Card Holder: _____	

1st Name as appears on passport: _____
Date of Birth: _____

2nd Name as appears on passport: _____
Date of Birth: _____

3rd Name as appears on passport: _____
Date of Birth: _____

4th Name as appears on passport: _____
Date of Birth: _____

Street Address (for signed deliveries): _____

City/State/Zip: _____

Phones: Home (_____) _____ Office (_____) _____

Email: _____

Terms & Conditions appear on the reverse side, on Page 2.

TOUR PRICE

PROGRAM	ADULT	SNG.SUP	CHILD
12 Days: Egypt & Jordan	5120	990	4200
14 Days: Ethiopia & Egypt	5890	1290	4750
17 Days: Ethiopia, Egypt & Jordan	6590	1420	5380

The ADULT price is based on two persons sharing a single room/cabin throughout the trip, for a minimum of 6 and a maximum of 16 persons. The additional Sng. Sup. is paid for a single to solely occupy a room/cabin. Kindly note that single accommodations are generally smaller and/or inferior to twin accommodations. The CHILD price applies to children under 12 years old on November 16, 2010, who are sharing a room/cabin with at least one full paying adult.

The Tour Price INCLUDES everything as described in the day-by-day itinerary, including accommodations, professionally guided sightseeing, meals as described in brackets at the end of each day’s description, and all taxes, fees and government levies for included items. The price also includes guiding throughout by EWT owner, Kathleen Morgan.

The Tour Price EXCLUDES anything not specifically mentioned above or in the day-by-itinerary, including but not limited to most beverages, some meals, tipping (Kathleen does not accept tips), the cost of obtaining proper documentation and health precautions, insurance, and all air fare including that required within the country program. Internal air fare in many cases is a part of an international air fare. The raw cost of the internal air for the 12-Day program as of October 1, 2009, was \$327. The cost for the other two programs was \$727. These amounts should be used for general guidance only.

\$200 of your \$500 DEPOSIT per person is nonrefundable. Once your funds have cleared into our accounts and we have confirmed you, \$200 of your deposit per person is immediately nonrefundable.

EWT does not accept phoned CANCELLATIONS. Only written cancellations (email is fine) are accepted. Once you are confirmed, any cancellation received before February 5, 2010, will incur a \$200 per person cancellation fee. Cancellations received after February 4 but before August 27, 2010, will forfeit the entire \$500 per person deposit. All funds received after August 26, 2010, are nonrefundable. FINAL PAYMENT is due before August 26, 2010.

YOU ARE URGED TO CARRY ADEQUATE INSURANCE FOR THIS PROGRAM. A variety of insurances are available, some allow a cancellation “for any reason”, and we will be happy to suggest certain carriers. If you wish Trip Interruption & Cancellation Insurance with the extended benefits that include coverage against pre-existing medical conditions, your insurance must be purchased within a limited time (1-2 weeks) of your initial deposit.

YOU ACCEPT EWT’S WAIVER OF RESPONSIBILITY: Explorers World Travel, Inc. “EWT” [the “Tour Operator”] accepts no responsibility for any damage, loss, accident, injury, delay or other irregularity which may be caused by the defect of any vehicle or the negligence or default of any company or person engaged in carrying out or performing any of the services involved in this tour. Nor does the “Tour Operator” accept responsibility for losses or expenses from sickness, weather, strikes, wars, or other such causes. Any such losses or expenses must be borne by the participant. The “Tour Operator” reserves the right to make changes in the published itinerary whenever, in their judgment, conditions warrant, or if they deem it necessary for the comfort, convenience, or safety of the tour. EWT reserves the right to decline to accept any person as a member of a tour. Once a tour has begun, EWT reserves the right to require any participant to withdraw from the tour, at any time, if such action is determined to be in the best interest of the health, safety and general welfare of the tour group or of the individual participant. Under such circumstances, no refund will be given. Baggage and personal effects are solely the responsibility of the owners at all times. Dates, schedules, program details, and costs, given in good faith, based on information available and in force as of October 1, 2009, and are subject to change and revision. As a condition to acceptance of enrollment, please read, agree to, and sign this waiver.

WAIVER OF LIABILITY: I/(we) have read the schedule of activities and other information for this tour and recognize and accept all risks thereof. I/(we) understand and agree on behalf of myself, my dependents, heirs, administrators, and assigns to abide by the conditions set forth on this page (Page Two) and to release and hold harmless the “Safari Operator” and any of their officers, employees, agents, licensees, or representatives from any and all liability for delays, injuries, or death, or for the loss of or damage to property. By signing this I also certify that I do not have any mental or physical condition that would create a hazard for myself or other participants.

Signature(s): _____

Date: _____ Each participant who is traveling must sign this waiver.