Marian Shrine Pilgrimage Date Payment Check # Date: October 07 - 17, 2024 Registration Form Date Payment Check # Cost: \$3,999 per person Departure: Round trip air from Dallas (DFW) Registration Form Date Payment Check # Departure: Round trip air from Dallas (DFW) Tour Operator: Nativity Pilgrimage: com Date Payment Check # Website: www.entivityPilgrimage.com Date of this trip if I don't hold an American Pasport. Passe read and agreed to all the terms and comultions as set forth in this brochure. Place read and agreed to all the terms and comultions as set forth in this brochure. Place read and agreed to all the terms and comultions as set forth in this brochure. Place Registry R ATCACIC COPY OF YOR DEPARTURE. Middle Middle Address City, State, Zipcode Place of issue Place of issue Expiration date Date of birth Gender: M F Emergency Contact (name & phone number) Special Toom accommodations Special Place of issue Special Place of issue Date of noom with (first & last name) Intend a commute Image: Place of issue City Code City Code Proced a commute Image: Place of issue Date of issue Date of	Join us for a 11-Day			For Office Use Only			
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SIGNATURE:_

DATE:__

PRINT NAME:_



Safe Travels First Class International Travel Protection Plan



Plan Highlights

- Comprehensive coverage for trip cancellation, trip interruption, emergency medical and post-departure travel coverage
- Pre-Existing medical condition waiver available
- US residents traveling within the United States and abroad
- Up to \$150,000 in Secondary emergency medical coverage
- Cancel for Any Reason available in most states
- Property Damage coverage available for accommodations
- Rates for AK, MO, and PA are listed on page 3 and all other state rates are listed on page 4

Property Damage

Provides reimbursement for direct physical damage to covered real or personal property within the unit occupied by the insured during the trip.

Cancel for Any Reason

Provides reimbursement for the percentage of the prepaid, non-refundable, forfeited payments you paid for your trip, if you cancel your trip for any reason not otherwise covered by this policy. Must be purchased with initial policy and within 14 days of the trip deposit date, and the full, non-refundable trip cost is insured. *Not available in NY and WA.

Pre-existing Medical Condition Exclusion Waiver

Exclusion is waived if coverage is purchased within 14 days of the initial trip deposit date, and the full, non-refundable trip cost is insured, and you are medically able to travel on the policy effective date.

10-Day Free Look

If you are not satisfied within 10 days of purchasing this plan, Trawick International will refund your premium cost if you have not departed on your trip or filed a claim.

Non-Insurance and Travel Assistance Services

24-hour travel assistance services are provided by On Call International.

Underwritten by:

Benefits listed describe all of the travel insurance benefits, underwritten by Nationwide Mutual Insurance Company. There are certain restrictions, exclusions and limitations that apply to all services and coverages. Plan benefits, limits, and provisions may vary by state. To review full plan details online, visit www.trawickinternational.com. You will receive a Certificate of insurance which describes the benefits and limitations in detail including available 24-hour emergency assistance services and for your state of residence.

Plan Admin:

Trawick International (888) 301 - 9289 PO Box 2284 Fairhope, AL 36533 info@trawickinternational.com www.trawickinternational.com