

*CD Trips LLC presents...*

# Exploring Scotland & Ireland

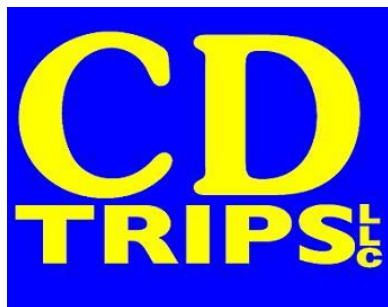
with Optional 3-Night London Pre Tour Extension

July 21 – August 2, 2024



Book By  
Jan 22, 2024  
& Save  
**\$200**  
Per Person

Upgrade to **Elite Airfare!** see inside for details



For more information contact

Judy Siegel

CD Trips LLC

(845) 295-9500

[cdtripsllc@gmail.com](mailto:cdtripsllc@gmail.com)



TRAVEL DATE: 7/21/2024 TERRITORY: A2  
RES#: 1182695

Exploring Scotland & Ireland

**For Reservations Contact:** Judy Siegel (845) 295-9500 email: cdtripsllc@gmail.com

CD Trips LLC, 3 California Ave, Liberty, NY 12754-1301

A deposit of \$698 per person is due upon reservation. Reservations are made on a first come, first served basis. Reservations made after the deposit due date of January 15, 2024 are based upon availability. Final payment due by May 22, 2024. Deposits are refundable up until January 22, 2024.

**YOUR INFORMATION:**

Clearly print your full name (first/middle/last) as it appears on your government issued travel documentation.

**IMPORTANT:** In order to avoid any unnecessary change fees, it is imperative that all guest names are entered correctly from the start. The information below must be the legal name and be 100% identical to the ID being used to travel <passport/driver's license> including middle names or suffixes <Jr, Sr>.

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Suffix: \_\_\_\_\_

Nickname: \_\_\_\_\_ Gender: ( ) Male ( ) Female Date of Birth: month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Expiration Date: (month/day/year) \_\_\_\_\_ Date of Issuance: (month/day/year) \_\_\_\_\_

City, State, Country of Issuance: \_\_\_\_\_ Citizenship: \_\_\_\_\_

**Should you become ill or injured, whom should we contact (not traveling with you):** \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**ROOMING WITH:**  Check if address is the same as Passenger #1

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Suffix: \_\_\_\_\_

**AIR GATEWAY:** Departure airport for this tour: \_\_\_\_\_

Air Seat Request: ( ) Aisle ( ) Window ( ) Next To Traveling Companion

Collette cannot guarantee your seat preference. If you have not purchased air through Collette and wish to purchase transfers, you must transfer at our pre-scheduled times. Please be advised, when travelling as part of a group, many airlines do not provide seat assignments. Preferred seating may be available for an additional charge.

Please reserve an upgrade to Elite Airfare for an additional rate of:  Business Class \$4,190

Service is limited and not available on all flights or carriers. Other restrictions may apply. Please note: if you purchase an upgrade we cannot guarantee the same flight schedule as the group. If Business class service has been purchased, it is for the international portion of the journey only.

Are you willing to separate from the group air schedule to accommodate your upgrade request? ( ) Yes ( ) No

"Federal law forbids carriage of hazardous materials such as aerosols, fireworks, lithium batteries & flammable liquids aboard the aircraft in your checked or carry-on baggage. A violation can result in 5 years' imprisonment and penalties of \$250,000 or more. Details on prohibited items may be found on TSA's "prohibited items" web page: <http://www.tsa.gov/traveler-information/prohibited-items>."

**TRAVEL PROTECTION:** ( ) Yes, I wish to purchase travel protection \$449 ( ) No, I decline

If you choose not to purchase Collette's Waiver Insurance Plan, you will incur penalties for changes and cancellations. Travel Protection Payment is due with first deposit. The Waiver Fee does not cover any single supplement charges which arise from an individual's traveling companion electing to cancel for any reason prior to departure. The single supplement will be deducted from the refund of the person who cancels. (There is coverage under Part B which includes a single supplement benefit of \$1,500 for certain covered reasons. See Part B for details.)

**EXTENSION:** I wish to purchase "3-Night London" ( ) Yes ( ) No

**PLEASE MAKE CHECKS PAYABLE TO:** CD Trips LLC ( ) Check ( ) Credit Card

Waiver/Insurance Amount: \$ \_\_\_\_\_ Deposit Amount: \$ \_\_\_\_\_ Total amount enclosed: \$ \_\_\_\_\_

Cardholder Name (if paying by Credit Card): \_\_\_\_\_

Cardholder Billing Address:  Check if address is the same as above \_\_\_\_\_

Cardholder Phone: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
M M Y Y

**SIGNATURE REQUIRED** for acceptance of the below conditions and agreement to credit card use:

Date: \_\_\_\_\_

I agree to pay according to the card issuer agreement. I understand and accept the cancellation policy, terms and conditions. See <http://www.gocollette.com/about-collette/terms-and-conditions> for full terms and conditions of your purchase.

**Important Conditions:** Your price is subject to increase prior to the time you make full payment. Your price is not subject to increase after you make full payment, except for charges resulting from increases in government-imposed taxes or fees.



162 Middle Street  
 Pawtucket, RI • 02860  
 Phone: 1-800-852-5655 Fax: 1-401-727-9014

If paying by credit card, please complete this form and return to CD Trips LLC. We can only charge your credit card for the amount noted if the signature, address and phone number are listed below. Thank you!

**CREDIT CARD AUTHORIZATION FORM**

BOOKING NUMBER: 1182695  
 DEPARTURE DATE: July 21, 2024

TOUR: Exploring Scotland & Ireland  
 GROUP NAME: CD Trips LLC

Name of Passenger:  
 Salutation: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_  
(Mr., Mrs., Rev.) (Please print as it appears on Passport) (Jr., Sr.)

Cardholder Name: \_\_\_\_\_  
(Please print as it appears on your Credit Card)

Cardholder Address: \_\_\_\_\_  
(as it appears on your credit card statement)

Cardholder Phone: \_\_\_\_\_

Credit Card Type: \_\_\_ American Express \_\_\_ Discover \_\_\_ MasterCard \_\_\_ Visa

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Amount to be charged: \$ \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I agree to pay according to the card issuer agreement. I understand and accept Collette cancellation policy, terms and conditions.

Participating credit card companies are now requiring a billing address and phone number for **FRAUD PREVENTION**. All information **MUST** be provided. Thank you for your cooperation! If using your credit card for payment, please return this Authorization Form by mail to:

**CD Trips LLC**  
 Attn: Judy Siegel  
 3 California Ave  
 Liberty, NY 12754-1301

Above credit card information has been called in to Collette.



162 Middle Street  
 Pawtucket RI 02860  
 Phone: 1-800-852-5655, Fax: 1-401-727-9014

**TOUR:** Exploring Scotland & Ireland  
**GROUP NAME:** CD Trips LLC

**DEPARTURE DATE:** Jul 21, 2024  
**BOOKING NUMBER:** 1182695

## AVAILABLE PREPAID OPTIONS

Personalize your tour by adding an optional activity below. Our recommended options have been carefully chosen to help enhance your individual experience. Complete the provided Prepaid Options Form to reserve your options.

Availability is limited and reservations are on a first come, first served basis. Payment must be received no later than 15 days prior to departure. Prices are subject to change. Children under the age of 18 MUST be accompanied by an adult.

**PASSENGERS NAME:** (Please submit a separate form for each passenger)

Salutation: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 (Mr., Mrs., Rev.) (Please print EXACTLY as it appears on Passport) (Jr., Sr.)

✓	Option	Price Per Person (USD)
	The Spirit of Derry	80.00
	Pub Lunch & The Guinness Storehouse <i>Reservations will not be accepted within 7 days of departure. This option is not offered on St. Patrick's Day or Easter Sunday. Children under the age of 18 MUST be accompanied by an adult and may not participate in the tasting at Guinness Storehouse.</i>	85.00
	Scottish Cultural Show: A Night of Food, Song & Dance <i>This option will not be offered on departures that include the Royal Edinburgh Military Tattoo.</i>	135.00

Please make checks payable to CD Trips LLC and send to:

CD Trips LLC  
 Attn: Judy Siegel  
 3 California Ave  
 Liberty, NY 12754-1301