



## TRAVEL LIABILITY RELEASE FORM

Thank you for your interest in travel! Whether you've signed up for one of our group tours, or booked a personal trip or vacation with us, we appreciate your business and look forward to serving you as one of our clients. Please review the following information, sign and return. If you are traveling with your partner or spouse, you may list both of your names, and both sign below. Then scan and email to [ztc@zacharytravel.com](mailto:ztc@zacharytravel.com) or mail it in to our office at 4257 Church St., Zachary, LA 70791.

**IMPORTANT INFORMATION ABOUT TRAVEL INSURANCE:** You are strongly encouraged to purchase travel insurance to protect the investment of your trip. We offer plans through Allianz and CSA/Generali and will be happy to send you a quote. Please be aware that you must purchase insurance within 14 days of deposit in order for pre-existing conditions to be covered. Also note - **if you are interested in cancel-anytime insurance, you must purchase at time of deposit.** All insurance payments are done over the phone with a credit card. Call our agency and we will assist you.

### **Responsibility and Disclaimer Statement for Tours and Travel Booked with Zachary Travel**

On the date indicated below, I requested that Zachary Travel ("Agency") make one or more travel bookings on my behalf as part of a group tour or for individual travel. As the worldwide COVID-19 coronavirus pandemic remains ongoing at this time, I acknowledge that for this reason, and other reasons not reasonably foreseeable at this time, these travel plans may be interrupted or cancelled by the supplier that is providing them, a government entity or other third party over which Agency has no control. I further acknowledge that the supplier's own cancellation, rebooking and refund policies, subject to any applicable law that is now or may later be in effect, will govern my rights and remedies, including my right to receive a refund, in such an event. Moreover, I understand that should I elect to purchase travel insurance, the terms of the policy will dictate whether, and to what extent, coverage for any financial loss may exist under the circumstances. By signing below, I hereby agree to hold the Agency harmless and release it from any and all liability for any damages, including but not limited to monetary losses, I may incur as a result of such interruption or cancellation of these travel plans.

Tour Name: \_\_\_\_\_

Name (print full name(s)): \_\_\_\_\_

Signature: \_\_\_\_\_

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

**\*\*This form must be signed and returned in order for our agency to complete your travel booking\*\***