

INSURANCE APPLICATION

Insured #1
Name: _____ M/F Date of Birth _____

Insured #2
Name: _____ M/F Date of Birth _____

Insured #3
Name: _____ M/F Date of Birth _____

Email Address: _____

Address: _____

Telephone: _____

PAYMENT INFORMATION (NO CHECKS ACCEPTED!)

Beneficiary: _____

AX MasterCard VISA Discover

Destination: Los Angeles, CA

Credit Card Number _____ Expiration Date _____

Airline: _____

_____/____/____

Tour Operator: Celestial Travel & Tours

Security Code _____ Amount: _____ per person

Departure Date: 04 / 15 / 10 Return Date: 04 / 21 / 10

I WOULD LIKE TO PURCHASE THE INSURANCE (**WITHOUT** CANCEL FOR ANY REASON) FOR: **\$ 30.00** p.p.

Any person who knowingly and with intent defrauds any insurance company is subject to criminal and civil penalties. I represent that the above information is true and the dates reflect are intent to start and end my trip. The policy goes into effect at 12:01 a.m. on the day after the postmark, telephone purchase, or online purchase confirmation date. Celestial Travel & Tours reserves the right to reject an application. I understand that certain medical conditions and default situations are not covered, unless this insurance is purchased within 10 days of the first initial trip deposit. I understand that if payment is returned unpayable for any reason, the policy becomes null and void. I also understand that any changes to this application do not change the coverage of the policy. Trip Insurance has to be purchased no later than 7 days prior to trip departure.

Signature _____ Date _____



3045 South Parker Road, Suite 201, Aurora, CO 80014
303-773-1224 1-800-359-7200 Fax: 720-248-3718
E-mail: groupdesk@celestialtrvl.com www.celestialtravel.net



Group Trip Insurance
Recommended by
CELESTIAL TRAVEL & TOURS

Because unforeseen circumstances can arise, we strongly recommend the purchase of trip insurance such as this specialized Protection Plan by Travel Insured International. Coverage can be purchased any time up to 7 days prior to departure, but any pre-existing conditions (such as Asthma) are only covered if insurance is purchased latest 10 days after the first initial trip deposit!

Following Benefits are included in the Insurance:

• Trip Cancellation	Tour Cost*
• Trip Interruption	150% of Tour Cost*
• Trip Delay	\$750.00 (\$150.00 per day)
• Missed Connection	\$300.00 (12 or more hours)
• Baggage & Personal Effects	\$1,500.00 (\$250.00 per item)
• Baggage Delay	\$300.00
• Emergency Accident & Sickness Medical Expense	\$25,000.00
• Emergency Evacuation Assistance Services	Included



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DETAILED DESCRIPTION OF TRAVEL INSURANCE COVERAGE

We will pay this benefit up to the maximum limit shown on the Schedule of Benefits if a trip is delayed, canceled or interrupted due to any of the following unforeseen circumstances:

- 1.) Sickness, injury or death of an insured or family member.
- 2.) Financial default of airline, cruise line or tour operator resulting in the complete cessation of services. Excluded is the organization from which your trip or this coverage was purchased. Coverage only applies if: (1) you purchased this policy within 7 days of Initial trip payment, and (2) the financial default occurs more than 14 days after the policy effective date. We reserve the right to substitute a trip of similar value in lieu of a cash payment.
- 3.) Weather conditions causing delay or cancellation of travel
- 4.) Strike resulting in the complete cessation of travel services
- 5.) Your home or destination being made uninhabitable by fire, flood or natural disaster.
- 6.) You, or a traveling companion being subpoenaed, required to serve on a jury, hijacked or quarantined
- 7.) A covered travel delay which results in the loss of more than 50% of your scheduled trip length
- 8.) A terrorist incident in a city to which you were scheduled to arrive within 30 days following the incident.

** NOTE: Insurance does not cover students when student moves and no longer attends the school that is hosting the trip.*