



HOW TO RESERVE YOUR SPACE ON HISTORIC TRAINS OF COLORADO:

Please complete the following steps:

- A) Call Evon Long to confirm availability: 309-663-6300, ext 821, or email elong@firststatebank.biz
- B) Complete the included "Reservation Form"
- C) Mail the "Reservation Form" with your deposit to the address listed on the "Reservation Form"

PAYMENT SCHEDULE

\$300 Deposit + \$195 Guest Protection Plan	Final Payment
Due at Time of Reservation	60 Days Prior to Departure

*Tour Deposit and optional Guest Protection Plan are **FULLY REFUNDABLE** until Final Payment Date.

RISK-FREE DEPOSIT!

Tour Deposit & Guest Protection Plan are **FULLY REFUNDABLE** until the Final Payment Date.

GUEST PROTECTION PLAN

Our **Industry-Leading Guest Protection Plan** is an excellent value and consists of a Cancellation Fee Waiver administered by Landmark Tours and Post Departure Insurance Benefits administered by Travel Insured International. The Guest Protection Plan must be purchased with initial trip deposit and is non-transferable.

Cancellation Fee Waiver

Trip Cancellation (48 Contiguous United States & Canada): With the purchase of the Landmark Tours Guest Protection Plan, you may cancel for any reason and receive a full refund of tour payments as long as we are notified 24 hours before your tour departs.

Trip Interruption

If you must leave the tour early due to personal illness, or the illness or death of an immediate family member, you will receive a refund of any unused portions of the package. Handling of return air transportation is included if tickets were provided by Landmark Tours as a part of the package.

Post Departure Insurance Benefits

Emergency Medical Evacuation	\$250,000
Non-Medical Evacuation	\$150,000
Accident & Sickness Medical Expense	\$50,000
Baggage/Personal Effects	\$1,500
Baggage Delay 24 Hours	\$400
Trip Delay	\$500

Airfare and Deviations

The Guest Protection Plan only covers the travel arrangements purchased from Landmark Tours and does not cover airfare booked through a different source or arranged on your own.

Refund & Cancellation Policy

All tour deposits and tour payments are fully refundable before the Final Payment Date. If the Guest Protection Plan is **not purchased**, the following per person Cancellation Policy will apply.

Up to Final Pay Date	Full Refund
Final Pay to 31 Days Before Trip	70% of trip cost refunded
30 to 15 Days Before Trip	60% of trip cost refunded
14 to 1 Day Before Trip	50% of trip cost refunded
Day of departure or early departure from trip	0% of trip cost refunded

Exclusions

Landmark Tours reserves the right to alter its Refund and Cancellation Policy when a significant amount of cancellation or interruption of travel are due to conditions caused by an act of God, civil disorder, government action, outbreak of disease man made or natural disasters, fire, war, unavailability of services or transportation through no fault of Landmark Tours. Should such a rare exclusion ever be made, those passengers who purchased the Guest Protection Plan will be issued credit valid for use on any Landmark Tours package that departs within one year of original tour registration.



TOUR RESERVATION FORM

The Historic Trains of Colorado | September 9 - 16, 2021

Each traveler must complete and sign the reservation form



Accommodations: Single Double

Preferred Number of Beds*: One Two

Name of Roommate: _____

**This is a request, not a guarantee & is subject to hotel availability.*

Traveler #1:

First: _____ Middle: _____ Last: _____ Nickname: _____

PRINT FULL NAME **EXACTLY** AS IT APPEARS ON GOVERNMENT ISSUED PHOTO I.D.

Address: _____

City: _____ State: _____ Zip: _____ Birthdate: _____ Gender: Male Female
(mm/dd/yyyy)

Home Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact: _____ Relation: _____ Phone: _____

Indicate any health concerns, food allergies, or mobility issues that your Tour Manager should be aware of: _____

Traveler #2 (if applicable):

First: _____ Middle: _____ Last: _____ Nickname: _____

PRINT FULL NAME **EXACTLY** AS IT APPEARS ON GOVERNMENT ISSUED PHOTO I.D.

Address: _____

(Leave address blank if address is the same as traveling companion)

City: _____ State: _____ Zip: _____ Birthdate: _____ Gender: Male Female
(mm/dd/yyyy)

Home Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact: _____ Relation: _____ Phone: _____

Indicate any health concerns, food allergies, or mobility issues that your Tour Manager should be aware of: _____

To Reserve Your Space:

_____ **Tour Deposit**
(\$300 per person)

+ _____ **Guest Protection Plan**
(\$195 per person)

= _____ **Total Amount Enclosed**

Payment options include the following for our travelers:

1) Credit Card 2) Debiting a FSB deposit account 3) Check (made payable to FSB Vista Club)

Mail reservation form with deposit to:

Evon Long
FSB Vista Club
502 N Hershey Rd.
Bloomington, IL 61704

Pay by Credit Card:



Name: _____ Billing Zip Code: _____

CC#: _____ Exp: _____ CVV: _____

I have read the Landmark Tours brochure and I agree to and accept its Terms & Conditions, Refund and Cancellation Policy, and Exclusions.

Signature of Person Traveling: _____ Date: _____

Signature of Traveler #2 (if applicable): _____ Date: _____