

Southern Italy and Sicily

September 24 - October 6, 2023

Program Cost †

\$4,679.00 per person - double occupancy

† A limited number of single rooms may be available at a supplemental cost of \$1,139.

† Price is based on a minimum of 27 group members.
Space is limited

Deposit Schedule

- \$500 per person due with reservation
- An additional \$1200 per person is due by March 1, 2023
- Final payment is due by June 1, 2023

Program Highlights

- Round trip air transportation from Chicago, including taxes and fees in effect as of November, 2022
- 11 nights accommodations in first class (3 & 4 star) hotels
- Breakfast daily and 6 dinners as noted in the itinerary
- Professional tour manager to accompany the group in Europe
- European transportation via private motorcoach
- Comprehensive sightseeing as outlined in the itinerary, including applicable entrance fees
- Masses to be scheduled during the tour
- Porterage of one suitcase per person at European hotels

RESERVATION FORM

Please make your check payable to Trans World Travel, Inc. and return to:

Fr. Boland and Mary Ann Spina Sicily Tour, c/o Trans World Travel, Inc., 734 Central Avenue, Highland Park, IL 60035

* Couples living at the same address may use the same form. Individuals living at separate addresses should use two forms.

Enclosed is my (our) completed reservation form for the Italy & Sicily tour departing on September 24, 2023 and a deposit check in the amount of \$500 per person. I understand that the completed form and deposit indicates my (our) acceptance of the General Conditions and Cancellation Policies stated on the back of this form and in the accompanying tour brochure and the understanding that there can be future increases by the air carrier for fuel and/or government related taxes. All payments must be made by check. We strongly recommend that all passengers consider optional travel protection insurance that can include pre-existing conditions. You will receive information about the NTA Travel Protection Plan in your welcome packet.

NAME(S) AS SHOWN ON YOUR PASSPORT(S): PLEASE PRINT CLEARLY!

Name 1. _____ Birth Date: _____

Name 2. _____ Birth Date: _____

First name(s) as you would like them to appear on your name tag(s): 1. _____ 2. _____

Address: _____
Street City State Zip

Daytime Phone: _____ Cell Phone: _____

Roommate: _____ Bedding preference (*not guaranteed*): ____one bed ____two beds

_____ I do not yet have a roommate. Please notify me if anyone is looking for a roommate for this trip.

_____ If available, I prefer a single room at the supplemental cost listed in the tour brochure.

Airline Seating Request (*not guaranteed*): _____ Window _____ Aisle

Dietary restrictions (if applicable) (*not guaranteed*): _____

E-mail address: _____ Signature: _____

Important: Please send a copy of the photo page of your passport to Trans World Travel!

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