

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 Blue Horizon Travel & Yacht Charters. 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: 1166827 TOUR: Memorials of World War II featuring the 80th Anniversary of the D-Day Landing

GROUP NAME: Blue Horizon Travel & Yacht DEPARTURE DATE: April 12, 2024

	Charters				
Name of Passenger:	Middle Initial	Last Name	Conffirm.		
(Mr., Mrs., Rev.)		Middle Initial: Last Name:(Please print as it appears on Passport)			
Cardholder Name:(Please print as it appears					
(Please print as it appears	on your Credit Card)				
Cardholder Address: (as it appears on your					
(as it appears on your	credit card statement)				
Cardholder Phone:					
Credit Card Type:Americ	can ExpressDiscov	erMasterCar	dVisa		
Credit Card Number:					
Expiration Date:	Amoun	t to be charged: \$_			
Cardholder's Signature:		Date:			
I agree to pay according to the card policy, terms and conditions.	l issuer agreement. I und	erstand and accept	Collette cancellation		
Participating credit card companies FRAUD PREVENTION. All inf If using your credit card for payme	formation MUST be provi	ded. Thank you fo	r your cooperation!		
Blue Horizon Travel & Y Attn: Bonnie Newman 12570 US Highway 150 Orion, IL 61273-9221	acht Charters				
Or by Fax to: (309) 526-8333					
Above credit card information has be	een called in to Collette.				



162 Middle Street Pawtucket, RI • 02860

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TOUR: Memorials of World War II featuring the 80th Anniversary of the D-Day Landing GROUP NAME: Blue Horizon Travel & Yacht Charters

DEPARTURE DATE: April 12, 2024

Available 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 serve 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.

Paris

Showtime in Paris! \$180 USD

Join us for a spectacular evening in one of Paris's most beloved institutions, the famous Paradis Latin. Situated in a building associated with Napoleon and rebuilt by Gustav Eiffel himself, the Paradis has been running here since 1889. Enjoy a sumptuous dinner with wine, then bring on the champagne and let the show commence! *Duration: Approximately 5 hours.* Please note a minimum of 15 passengers is required. Transportation is included.

PASSENGERS NAME: (Please sub	nit a separate form for each passenger)		
Salutation:First: (Mr., Mrs., Rev.)	Middle: Last: Last	Suffix:Nickname:	
✓	Option	Price Per Person (USD)	
Showtime in Pa	aris!	180.00	

Please make checks payable to Blue Horizon Travel & Yacht Charters and send to:

Blue Horizon Travel & Yacht Charters Attn: Bonnie Newman 12570 US Highway 150 Orion, IL 61273-9221

Fax: (309) 526-8333



TRAVEL DATE: 4/12/2024 TERRITORY: M7 RES#: 1166827

Memorials of World War II featuring the 80th Anniversary of the D-Day Landing

For Reservations Contact: Bonnie Newman (309)737-0059 email: bonnie@bluehorizon.net Blue Horizon Travel & Yacht Charters, 12570 US Highway 150, Orion, IL 61273-9221

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 August 06, 2023 are based upon availability. Final payment due by February 12, 2024. Deposits are refundable up until August 13, 2023. 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 _	da	y year	
Address:		City:		State:	Zip Code:	
Phone: ()	Cell: ()		Email Address:	:	
Passport Number:	Expiration Date: (month/day/year)		year)	Date of Issuance: (month/day/year)		
City, State, Country of Issuance:				Citizenship:		
Should you become ill or injured, whom s ROOMING WITH: Check if address is t	·	_	th you):	Ph	ione: ()	
First:	Middle:		_Last:		Suffix:	
AIR GATEWAY: Departure airport for this to Air Seat Request: () Aisle () Window (Collette cannot guarantee your seat preference. I Please be advised, when travelling as part of a gr Please reserve an upgrade to Elite Airfare for Service is limited and not available on all flig same flight schedule as the group. If Busines Are you willing to separate from the group air so "Federal law forbids carriage of hazardous materi baggage. A violation can result in 5 years' impris http://www.tsa.gov/traveler-information/prohibited TRAVEL PROTECTION: () Yes, I wish to p If you choose not to purchase Collette's Waiver Ins Fee does not cover any single supplement charge supplement will be deducted from the refund of the covered reasons. See Part B for details.) PLEASE MAKE CHECKS PAYABLE TO: B) Next To Traveling f you have not purchas oup, many airlines do not an additional rate of this or carriers. Other is class service has chedule to accommodals such as aerosols, find the such as the such as aerosols, find the such as the such as aerosols, find the such as t	ed air through Coll not provide seat as f: Business restrictions may been purchased, ate your upgrade reworks, lithium bas \$250,000 or mor tion \$449 () Nour penalties for chaindividual's travelir (There is coverage.	signments. Preferred seases Class \$4,290 apply. Please note: if it is for the internation request? () Yes () Natteries & flammable liquing. Details on prohibited in the index of the liquing seases and cancellations. The companion electing to be under Part B which include () Check () Creditions.	you purchase an u al portion of the jou lo ds aboard the aircraft items may be found of Travel Protection Pay cancel for any reaso udes a single supple	le for an additional charge. Appgrade we cannot guarantee the curney only. It in your checked or carry-on on TSA's "prohibited items" web page: Ament is due with first deposit. The Waiver on prior to departure. The single ement benefit of \$1,500 for certain	
Waiver/Insurance Amount: \$	Deposit Am	ount: \$	Total ar	mount enclosed: \$_		
Cardholder Name (if paying by Credit Card):						
Cardholder Billing Address:	ess is the same as abo	ove				
Cardholder Phone:			Amount: \$			
Credit Card Number:			Expiration Date to credit card use:	ate:		

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.