



Insurance Waiver

Lead Passenger Name: _____

Departure Date: _____ Destination: _____

Vendor: _____

Confirmation Number: _____

Please initial the following statements:

____ I have been given a copy of the vendor’s cancellation policy and a written explanation of the travel insurance that has been offered.

____ I have been advised to check with my credit card company, my primary health insurance and my property or car insurance in order to understand what coverage is already available to me.

____ The Travel Agent has explained that it is in my best interest to purchase trip cancellation, trip interruption and travel insurance.

I have been offered :

____ Pre-Travel Trip Cancellation Insurance only at a rate of _____ per person.

____ Trip Cancellation, Interruption and Medical Insurance at a rate of _____ per person

I, the undersigned, have chosen to Accept/Decline Trip Insurance. I release Classic World Travel and all of its managers and agents from any expenses resulting from the cancellation or interruption of my trip. I understand that if I have chosen to purchase the insurance, I will be directed to submit all claims in writing to the insurance policy underwriter. I further understand that if I have chosen to decline the insurance, I am solely responsible for all costs associated with the vendor’s cancellation policy. I accept responsibility for all parties traveling with me and have authority to act on their behalf when signing this waiver.

Client Signature: _____ Date: _____



200 Commerce Drive, Peachtree City, GA 30269
770-487-9529 Office 770-487-9645 Fax



Documentation Advisory

Lead Passenger Name: _____

Departure Date: _____ Destination: _____

Vendor Name: _____

Confirmation Number: _____

I have been advised that I need the following documentation for my trip:

_____ Certified Birth Certificate with a raised seal and a driver's license

_____ Valid United States Passport

_____ Visa as required by country of arrival

_____ Immunization record required by country of arrival

_____ other _____

I, the undersigned, have been informed that only the above types of documentation are acceptable. Without this documentation, airlines, cruise or tour companies, or international officials have the right to deny boarding or entrance to the country of arrival. I understand that if a birth certificate is required that it must be a certified copy with an official raised seal. I understand that hospital birth certificates are not considered certified and are therefore unacceptable. I hereby release Classic World Travel and all of its agents from all liability resulting from improper documentation. If the case is such that proper documentation is not available, I have been instructed as to how it can be obtained and will be held personally responsible for acquiring the proper documentation. By signing this document, I assume responsibility for all parties traveling with me and have the authority to act on their behalf in signing this waiver.

Client Signature: _____ Date: _____



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