

I decline to	o purchase	travel insu	ance options	that my	travel ager	nt has offere	ed and ex	xplained to	o me:

- > Cancellation & Interruption
- > Emergency Medical / Transportation
- > Baggage & Personal Effects
- > Flight & Travel Accident
- > Rental Car Physical Damage
- ☐ I, the undersigned, will not hold my travel agent or the travel agency, responsible for any expenses incurred from any sources as a result of:
 - 1. My refusal to purchase travel insurance for the full value and duration of the trip.
 - 2. Credit card insurance coverage:
 - > restricted benefits, conditions and/or exclusions related to my credit card insurance, or
 - > insufficient protection offered by my credit card insurance, or
 - > non-existing coverage of my credit card insurance.
 - 3. Private or public health care coverage.
 - 4. Any additional single supplement costs if my travelling companion is unable to travel and I still choose to travel.
 - 5. Other additional costs if insurance is not purchased at the time of initial trip deposit; such as:
 - > change in medical condition
 - > increased supplier penalties
 - 6. The unforeseen financial default or bankruptcy of the tour operator, cruise line or airline carrier from which you have purchased your travel arrangements.

Name of Client(s):	
Client's Signature:	
Date of Signature:	
Travel Agent's Signature:(witness)	
Date of Travel:	
Agency File #:	



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