



# Cleveland Metro Ski Council

Friday, January 11 - Saturday, January 19, 2019

Paris, France - January 19-23, 2019

St. Anton, Austria

- **PACKAGE INCLUDES:** Friday, January 11 - Saturday, January 19, 2019
- Air Cleveland to Munich, Germany and home
- 7 NIGHTS LODGING 4 star hotel Karl Schranz, 2 per hotel room
- LODGING and AIRLINE TAXES and Fuel surcharges
- Breakfast and dinner daily (lift tickets not included)
- Round trip bus transfers from Airport to St. Anton

**Please mail a copy of passport with deposit**

(This is needed for making sure airline tickets have your name the way it is on your passport. I also keep copy with me during trip incase you lose it during trip)



**OPTIONAL 4 DAY ( 4 nights ) Paris, France (Sun-Thursday)**  
**\$489 per person**

- Round trip airport bus transfers
- 4 nights lodging at 3 star hotel Magellan, 2 per hotel room
- Breakfast daily

**PAYMENT SCHEDULE:** make checks payable to CLEVELAND METRO SKI COUNCIL (CMSC)

Choose the payment plan that matches the package you are getting.

Full Package w/ Air St Anton + 4 nights (Jan. 11-23, 2019) in Paris \$2439	St. Anton only (Jan. 11-19, 2019) with air \$1950	St Anton (Jan. 11-19, 2019) Land only no air \$1301	St Anton with Paris (Jan. 11-23, 2019) (Land only no Air) \$1790
<b>Payment schedule</b> 1) \$500 Deposit 2) \$400 September 1st 3) \$649 October 1st (Air) 4) \$500 November 1st 5) \$390 December 1st <b>Total: \$2439</b>	<b>Payment schedule</b> 1) \$500 Deposit 2) \$500 September 1st 3) \$649 October 1st (Air) 4) \$301 December 1st <b>Total: \$1950</b>	<b>Payment schedule</b> 1) \$500 Deposit 2) \$500 September 1st 3) \$301 November 1st <b>Total: \$1301</b>	<b>Payment schedule</b> 1) \$500 Deposit 2) \$500 September 1st 3) \$500 November 1st 4) \$290 December 1st <b>Total: \$1790</b>

**If not a member of a CMSC member club add \$25 or join a club that is a CMSC member**

<b>Cancelation Policy:</b> <ul style="list-style-type: none"> <li>• Cancel off Trip before Oct.1st you pay a \$25 service fee.</li> <li>• Cancel between October 1st till November 1st \$1000 loss</li> <li>• Cancel after November 1st 100% loss</li> </ul> If we are able to fill your spot your loss may be reduced. We will refund you as much as possible. Read Trip Agreement Sect. E	<b>Cancelation Policy - Read sections (E)</b> Refunds on the trip agreement form. If any questions please contact trip leader listed below (please note there is a \$25 service fee for any cancelation made after deposit)
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**TRAVEL INSURANCE IS AVAILABLE:** Travel is a perishable product. We highly recommend that you purchase Travel Insurance to cover your investment. Please contact trip leader for your options on insurance ASAP. You may use the insurance agent below or anyone of your choice.

- ◆ Myra Altschuler - Travel Protectors, www.travelprotectors.com - myra@travelprotectors.com 1-703-443-9055/1-877-515-9055.
- ◆ Travel Guard is another company you can check into at http://www.travelguard.com

**Mail payment to:**  
Curtis Bell, CMSC Trip Chair  
105 N. Colonial Drive  
Cortland, OH 44410-1105

**For information contact;**  
**Curtis Bell, CMSC trip leader**  
curtiscmsc60@gmail.com  
**Home: 330-638-8005 or cell: 330.240.8005**  
**Also visit www.skicleveland.com**

Please initial:

CLEVELAND METRO SKI COUNCIL, INC. TRIP AND TOUR AGREEMENT

- A. DEPOSIT:** The initial deposit for St Anton January 11-19, 2019 with add on to Paris Jan. 19-23, 2019
- B. IDENTIFICATION:** Each person MUST HAVE AN UP-TO-DATE PASSPORT OR PICTURE ID for presentation at the airport for check-in. No Refunds will be made to any passengers whose participation is affected due to failure to possess proper identification.
- C. CANCELLATION AND/OR CHARGES:** Cleveland Metro Ski Council, Inc. (CMSC) reserves the right to withdraw the tour, to refuse to accept or retain any person as a member of the tour at any time, or make changes in the published itinerary whenever in their sole judgment conditions warrant prior to departure time. CMSC may add supplemental cost such as but not limited to fuel sur-charges, taxes, and currency exchange rate and airport departure charges to the price of this trip.
- D. RESPONSIBILITY:** CMSC is acting as agent for the applicant and shall not be liable for any loss of or damage to baggage or prop-erty, for any loss, injury, personal injury, death, accident, delay, inconvenience, or any other loss during, or occasioned by appli-cant's participation or lack of participation, in any trip or tour. Trip participants will ski or snowboard at their own risk.
- E. REFUNDS:** A full refund will be made to applicant if the trip is canceled by CMSC except and unless where such cancellation is necessitated or caused, either wholly or in part, by applicant's cancellation or failure to make timely payments. Failure to make time-ly payments, at trip chairperson's discretion, may be deemed cancellation.
  - 1) Where applicant "cancels" at any time and where the trip or tour departs with 100% capacity ("filled") applicant SHALL be entitled to a full refund less a \$ 25.00 service charge and any costs incurred by CMSC because of the cancellation.
  - 2) Where applicant "cancels" ninety (90) days or more prior to departure, and where the trip or tour departs with less than 100% capacity ("Unfilled"), and where applicant provides and secures an eligible individual who completes applicant's Trip or Tour Agreement ("Replacement"), then applicant SHALL be entitled to a full refund, less a \$25.00 service charge and any cost incurred by CMSC because of the cancellation and change.
  - 3) Where applicant "cancels" less than 90 days prior to departure, and where the trip or tour departs "unfilled", and where applicant has not provided and secured a "replacement", then applicant will FORFEIT INITIAL DEPOSIT (SEE TRIP), be charged a \$25.00 service fee, and ANY AMOUNTS EXPENDED, PAID, or INCURRED BY CMSC AS A RESULT OF THE "CANCELLATION" INCLUDING UNUSED AIRFARE,
  - 4) LODGING, LIFTS, OR OPTIONS. Regardless of when reservations are made, a passenger may cancel only by mail, sent to the trip chairperson's address listed on trip. Applicant shall be liable to CMSC for any monies expended or paid by CMSC over and above payments made by applicant to CMSC.
- F. OTHER:** Participant shall be a CMSC member or a CMSC family member or a member of a non-profit ski organization. A trip mem-bership fee will be charged to a non member, fee will be determined by CMSC. Any trip or tour and this Agreement are subject to CAB rules and regulations.
- G. TSA RULE:** As of May 2009, it is mandated from TSA that we know your COMPLETE LEGAL FIRST NAME, MIDDLE NAME AND LAST NAME ALSO BIRTH DATE AND GENDER FOR TICKETING. Not supplying the information can cause no airline ticketing or cancellation from trip.

Please initial each one letting me know you read these statements

Land only: If I choose to purchase my own air it will be my responsibility to make sure my schedule gets me to the airport in time to travel with the group from the Airport to the Hotel. I also understand that when we leave the hotel to travel to the airport my flight schedule most correspond with our hotel departure time. ( Schedule your fight so you either leave at the same time or after the group). Please note that CMSC is not responsible if the group flight schedule changes.

I know that if I miss one or more of my flights while traveling with the group it will become my responsibility to find my own ground transportation from the airport to the hotel. Any additional cost caused by this will be my responsibility.

Each person on the trip must sign this from

PLEASE SIGN AFTER READING AND AGREEING TO THE ABOVE TRIP AGREEMENT

Trip Participant's Signature:

DATE:

PLEASE PRINT NAME:

**TRIP PARTICPANT'S INFORMATION ST, ANTON JAN. 11-19, 2019 ( PARIS JAN, 19-23)**

**WRITE NAME AS IT APPEARS ON YOUR PASSPORT. INCLUDE A COPY OF YOUR PASSPORT WITH THIS FROM**

Last name:	First:	Middle:
Date of birth	Month:	Day:
	Year:	Sex
	Male:	Female:
Street address:		
City:	State:	ZIP Code:
Home phone #	Cell Phone #	
Email address		
Name of CMSC Ski Club you belong to:		
Roommate:		

**Please put X the all those that apply**

<input type="checkbox"/>	Full Package w/ Air - St Anton + 4 nights (Jan. 11-23, 2019) in Paris \$2439
<input type="checkbox"/>	St. Anton only (Jan. 11-19, 2019) with air \$1950
<input type="checkbox"/>	St Anton (Jan. 11-19, 2019) <b>LAND ONLY</b> – NO AIR \$1301
<input type="checkbox"/>	St Anton with Paris (Jan. 11-23, 2019) <b>LAND ONLY</b> – NO AIR) \$1790
<input type="checkbox"/>	I would like a private room while in St Anton at the additional cost of \$185
<input type="checkbox"/>	I would like a private room while in Paris at the additional cost of \$255
<input type="checkbox"/>	I do not have a roommate but I would like you to try and get me roommate. I realize that if I don't get a roommate that I will have to pay for a single room. If we can't find you a roommate by October 1 <sup>st</sup> to make that decision.

**Please initial each one below letting me know you read these statements**

<input type="checkbox"/>	Land only: If I choose to purchase my own air it will be my responsibility to make sure my schedule gets me to the airport in time to travel with the group from the Airport to the Hotel. I also understand that when we leave the hotel to travel to the airport my flight schedule must correspond with our hotel departure time. (Schedule your fight so you either leave at the same time or after the group). Please note that CMSC is not financially responsible if our group air schedule changes for any reason.
<input type="checkbox"/>	I know that if I miss one or more of my flights while traveling with the group it will become my responsibility to find my own ground transportation from the airport to the hotel. Any additional cost caused by this will be my responsibility.
<input type="checkbox"/>	Any changes you want made after filling out this form must be made in writing. You can do this by snail mail or by email.
<input type="checkbox"/>	It is my responsibility to have a valid passport. Your passport must be valid for 6 months beyond the date of the trip's conclusion. PLEASE INCLUDE A COPY OF YOUR PASSPORT WITH TRIP PAYMENT.
<input type="checkbox"/>	Frequent flyer mile number – Delta Airlines
<input type="checkbox"/>	TSA or Global entry number if you have one.

**IN CASE OF EMERGENCY**

Name :	Relationship	Home phone	Cell phone