

Acknowledgement Form

(All Fields Required - PLEASE PRINT LEGIBLY)

Travel Agency Name

Date: _____

AGENT CONTACT INFO

Agent Name: _____ Agent Phone #: _____

Email: _____

**Please take time to verify your itinerary.
travel plans are accurate.**

wants to be sure your

Please verify the following applicable information for those boxes that have been checked:

- | | |
|---|---|
| <input type="checkbox"/> Correct legal names | <input type="checkbox"/> Car rental information |
| <input type="checkbox"/> Dates | <input type="checkbox"/> Hotel Supplier information |
| <input type="checkbox"/> Flight times | <input type="checkbox"/> Cancellation fees/policy |
| <input type="checkbox"/> Airline fees/code share | <input type="checkbox"/> Deposit/Payment Schedule |
| <input type="checkbox"/> Insurance Terms and Conditions | |

I hereby verify that I have reviewed my travel itinerary for accuracy. I have been advised of all applicable fees imposed by _____ and the suppliers as well as any scheduled fees that may be required if this booking is cancelled or changed.

_____ offers retail travel services to customers, which are provided by separate and independent vendors of travel services. _____ does not operate, control, or otherwise provide the services of the independent travel vendors. I agree and understand that _____ is not responsible for any operating failures, loss, damage, delay, or injury to me or members of my travelling party, nor for consequential damages, which may result from failure, delays, or injuries, which arise out of or during the scheduled travel. I agree and understand that _____ is not responsible for any damages, direct or consequential, which may arise as a result of acts of God, social or labor unrest, war, political or national strike, terrorist activities, mechanical failures, climatic conditions, or any other actions or omissions beyond the control of _____.

Client Signature _____ Date: _____

Client Name _____