TRAVEL INSURANCE
Travel insurance for trip cancellation and interruption, medical problems, baggage loss and delay, etc., is highly recommended. Trip cancellation policies that apply to this expedition are included in this brochure. Information about travel insurance will be sent to confirmed participants.

A NOTE ABOUT RATES
Program rates are based upon current fuel prices, currency values, taxes, tariffs, and a minimum number of participants. While we will do everything possible to maintain the listed rates, they are subject to change. If there are significant changes, details and costs will be advised prior to departure.

TERMS & CONDITIONS

RESERVATIONS & PAYMENTS
To reserve space, return the completed reservation form with your $1,000 per person deposit to: AIA Tours, P.O. Box 938, 47 Main St., Suite One, Walpole, NH 03608-0938 or fax to 603-756-2922. Balance of payment is due 120 days prior to departure (November 24, 2023). We accept checks, payable to “Eos – AIA AqabaAthensCRI3/24” as well as VISA, MasterCard and American Express for deposits. Reservations will be processed in order of receipt. Credit cards are NOT accepted for final payment.

PASSENGER CANCELLATIONS & REFUNDS
Cancellations must be received in writing by AIA Tours. Deposits are refundable (less a $250 per person admin fee) if written notice of cancellation is received within 30 days of booking; after that, deposits are 100% nonrefundable. After the November 24, 2023 final payment deadline: All payments are 100% nonrefundable, regardless of booking date. For this reason, we strongly urge participants to purchase trip cancellation insurance. Refunds cannot be made to participants who do not participate in any part of the program, who do not complete the tour for whatever reason, or whose entry into any country and/or hotel or aboard any cruise vessel on the itinerary is delayed or denied.

TRIP CANCELLATION & REFUNDS
If the program is cancelled by AIA Tours or Criterion Travel, our tour operator, you will receive a full refund, without further obligation on our part. However, if trip cancellation, itinerary changes, and/or delays are mandated by causes beyond our control, the participant shall have the option of accepting in lieu of the original tour such rescheduled tour or other substituted tour(s) as may be offered by AIA Tours or Criterion, or receiving a refund of as much of such advance tour expenditures as AIA Tours and Criterion are able to recover on the participant's behalf from tour operators, carriers, third-party tour vendors, etc. Neither AIA Tours nor Criterion shall have any obligation or liability to the participant beyond the foregoing, including airfare and airline fees.

HEALTH
All participants should be in good health and capable of keeping up with an active group of travelers. By forwarding your deposit for passage, the participant certifies that he/she does not have any physical or other condition or disability that would create a hazard for him/herself or other participants.

ITINERARY CHANGES
The itinerary, study leaders, and accommodations presented for this tour are subject to modification and change by AIA Tours and Criterion Travel. Every reasonable effort will be made to operate the program as planned; however, should unforeseen world events and conditions require the itinerary to be altered, AIA Tours and the tour operator reserve the right to do so for the safety and best interest of the group. Any extra expenses incurred in this situation are the responsibility of the participant.

RESPONSIBILITY
By submitting your deposit, you are bound to the terms and conditions delineated throughout this brochure. Due to space limitations these are not AIA Tours’ complete Terms & Conditions, which are available upon request, can be viewed on-line at www.aiatours.org, and will be sent to you along with a Release of Liability requiring your signature. California Seller of Travel Program CST #208880-40

RESERVATION FORM
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CONTACT INFORMATION (please print)

NAME #1 (AS IT APPEARS ON PASSPORT)        DATE OF BIRTH
NAME #2 (AS IT APPEARS ON PASSPORT)        DATE OF BIRTH
MAILING ADDRESS
CITY / STATE / ZIP
HOME PHONE          MOBILE PHONE
EMAIL #1
EMAIL #2

Are you traveling with any other parties on this program?
☐ Yes, __________________________________________

PAYMENT INFORMATION
☐ Enclosed is my check for $_____________ ($1,000 per person, payable to “Eos – AIA AqabaAthensCRI3/24,” for __________ place(s) on Petra to the Parthenon.
☐ Please charge my deposit of $_____________ ($1,000 per person) to my
VISA    ☐ MasterCard    ☐ American Express

NAME ON CREDIT CARD

CREDIT CARD NUMBER        EXP. DATE        SECURITY CODE

CARDHOLDER SIGNATURE

ACCOMMODATIONS (not guaranteed)
Cabin Category Preference: 1st __________ 2nd __________
Bed Preference ☐ King/Queen ☐ Twins

SINGLE TRAVELERS (choose one)
☐ I prefer to have single accommodations. (limited availability)
☐ I plan to share accommodations with:

I’d like to know about roommates.
I am a ☐ non-smoker ☐ smoker

I understand that if a roommate cannot be found by the final payment deadline of November 24, 2023 I will pay the single rate.

(We have read the tour information section of the brochure and agree to the Terms and Conditions stated therein.

SIGNATURE #1        DATE
SIGNATURE #2        DATE