ILR Travel Committee Trip Disclosure Form

Incomplete forms will NOT be processed!

This form clarifies the policies of ILR and the commitment of the trip participant(s)

CHRISTMAS CANDLELIGHT TOUR
IN HISTORIC EDENTON, NORTH CAROLINA

ILR Day Trip: Friday, December 13, 2024
Sign-up Deadline: Friday, August 09, 2024
One Bus: Minimum 35 participants; Maximum 40 participants

If interested in this outstanding trip, do not wait until the sign-up deadline to submit paperwork. Spaces are filled in the order of receipt and completion. Once the maximum (40) is reached, a numerical wait list is kept based on the submission date of completed paperwork. If you are traveling with a friend, make certain that your paperwork is submitted simultaneously, otherwise travel for both is not guaranteed.

To secure your reservation/s for this ILR Trip, return this signed Trip Disclosure Form, Registration form, and Check, payable to ILR. Members as well as those invited must submit a disclosure and registration form.

Please initial each statement below. If a couple (i.e., husband and wife) are traveling together, both need to initial and sign this document. Copy for your records.

- ILR reserves the right to cancel a trip if the minimum numbers are not met. Money will be refunded.
- If a member cancels after the Sign-up Deadline (08/09/2024), and a replacement from the wait list is secured, a full refund is issued.
- If a member cancels after the Sign-up Deadline (08/09/2024), and there is NO wait list, ILR does not issue refunds; however, the member may secure his/her replacement, making financial arrangements with the replacement and notifying the ILR office no later than December 09, 2024.
- Wait List Policy: If you are on the wait list, ILR will notify you as cancellations are received. Those who are still on the wait list at the time of the trip will be issued a full refund check.
- Primary communication with trip participants will be by E-mail.

Signature/s: PLEASE PRINT LEGIBLY and SIGN
ADD YOUR CONTACT NUMBER, AND EMERGENCY CONTACT INFORMATION

TRAVELER’S PRINTED NAME

______________________________ ____________________________ Date________

PHONE NUMBER ___________________________ (cell preferred)

EMERGENCY CONTACT Contact phone number Relationship

______________________________ ____________________________ ____________________________

2nd TRAVELER’S PRINTED NAME

______________________________ ____________________________ Date________

ADDITIONAL INFORMATION CAN BE ADDED TO THE BACK OF THIS PAGE IF NEEDED.

Office Use Only: Date Rec’d __________ Trip $ Pd _____________ Ck. No.________________