



Excelsior Travel & Tours

www.excelsior-travel.com

Please use the following guidelines to guarantee your group itinerary base fare.

Group Name: _____ **Contract due date:** _____

Record Locator: _____ **Deposit due date:** _____

Group size: _____ **Deposit per person:** _____

Payment due date: _____ **Name due date:** _____

Change Fee: _____

- A group consists of 10 or more customers traveling together. In the event customers do not meet the requirement, the fare will revert to a publish fare.
- **Continental** reserves the right to change equipment or schedules without notice. **Continental** will not be liable for delays or cancellations due to weather or any other cause beyond the airlines' control.
- Any time the group reduces to a minimum of ten passengers, the new utilization requirements will be 100 %. Cancellations prior to penalty date are subject to utilization penalties. Cancellations after penalty date are subject to utilization requirements. Deposit are non refundable.
- Seats are subject to cancellation if the aforementioned guidelines are not met.
- Please sign and return all pages of the contract.

Thank you for giving Excelsior Travel the opportunity to serve your group needs. If you have any questions regarding these arrangements, please do not hesitate to call us back
Tel: 713-777-4481

CURRENT INTERNATIONAL TAXES, FEDERAL EXCISE TAX, PASSENGER FACILITY CHARGES, SURCHARGES OR ANY OTHER FEES INDICATED ARE NOT GUARANTEED AND SUBJECT TO CHANGE.

Please provide us with the following information:

GROUP LEADER NAME _____

GROUP LEADER
PHONE NUMBER ____-____-____ (B) ____-____-____ (C) ____-____-____(H)

NAME OF HOTEL / RESORT _____

HOTEL / RESORT PHONE ____-____-____

We must be notified immediately of any baggage and equipment outside the normal Baggage guidelines. We then can advise you of any extra charges, if applicable, and if the baggage will be able to accompany your group on your flight.

It is very important for us to know if your customers have special needs to provide the best service.

ACCEPTED ON THIS

_____ DAY OF _____ 2004

Authorized Signature