Hold Harmless Release Form

<u>BEST of CENTRAL ITALY</u> <u>Rome/Florence/Pisa/Siena & Pompei</u> <u>May 13-24, 2024</u>

Valerie and Wayne Graczyk are co-directors of your travel experience and are your hosts. Please read carefully and return a signed copy <u>for each traveler (or both sign one copy</u>. This should be sent to Someday Travel, PO Box 1454, Fond du Lac, WI 54936-1454.

I/We hereby indicate it is my desire to participate in the Central Italy, coordinated by Valerie & Wayne Graczyk of Someday Travel, during the dates of May 13-24, 2024. My participation in this travel experience is completely voluntary.

As a participant I/We agree to the following:

- 1. Assume full legal and financial responsibility for my participation in the travel experience
- 2. Will be responsible for the full program costs based on the cancellation dates and amounts owed and understand the refund dates and amounts on Terms & Conditions.
- 3. Grant Valerie and Wayne Graczyk the authority to act in any attempt to safeguard and preserve my health or safety during my participation in the program including authorizing medical treatment on my/our behalf at my/our expense and returning me/us to the United States at my/our own expense for medical treatment or in case of an emergency. (I/We are responsible to be sure that my/our medical insurance includes and covers these expenses)
- 4. Understand it is mandatory to have purchased Medical and Trip Cancellation Insurance prior to traveling with Valerie and Wayne Graczyk. I/We recognize that Valerie and Wayne Graczyk are not insurance experts, and it is my/our job to seek adequate coverage for medical and trip cancellation insurance.
- 5. Agree to conform to standards of conduct to insure the best interest, harmony, comfort, and welfare of all participants.
- 6. Accept termination of my/our participation in the travel experience with no refund fees and accept responsibility for transportation costs home if I /We fail to maintain acceptable standards of conduct to ensure all participants safety and well being;
- 7. Understand the travel agency Pilgrim Tours reserves the right to make changes to the itinerary at any time and for any reason, with or without notice and 'Someday Travel' cannot be liable for any loss whatsoever to the participant as a result of such changes.
- 8. Agree voluntarily and without reservation to indemnify and hold harmless Valerie and Wayne Graczyk, and their immediate family members and employers for any

liability, loss, damages, costs or expenses (including attorney's fees) while acting as tour coordinators and as a result of participation in the travel experience including any travel incident thereto:

9. Acknowledge I have read this entire document and understand its terms

Participant's Signature

Date_____