

Roanoke Regional Chamber & CI Destinations Present

The Best Of
Ireland

Departing October 24, 2017

**Only \$2,949 if booked by
April 30, 2017!**

**Please call the Chamber for more
information at (540) 983-0700.**

Highlights:

7 nights at 4-star hotels

Muckrose House

Cliffs of Moher

St. Patrick's Cathedral

Wicklow National Park

Adare Village

Blarney Castle

Trinity College

Book of Kells

Old James Whiskey Distillery

Additional information

Please make checks payable to CI Destinations

Passport Information: A valid passport is required for this tour and is the responsibility of each passenger. Passports should be valid for up to six (6) months beyond the travel dates. All names must be submitted exactly as they appear on the passenger passport.

Rate: \$3,049 per person, double occupancy. Single Supplement is \$450. Final payment is due 90 days prior to departure.

Included in the tour price: Round-trip airfare from Dulles. CI Destinations is not responsible for airport transportation in the case of strikes, delays or natural disasters. Fuel surcharges and airport departure taxes are included but can increase at the time of billing and any difference will be added to your statement.

*Early Booking Discount: Simply make your deposit by March 31, 2017 and make your balance of payment by check, and you will receive a \$100 discount per person.

Refunds: Cancel up to 90 days prior to departure: \$200 per person non-refundable fee, Cancel 89-50 days prior to departure: 50% of the total trip price is refunded, Cancel 49 days or less prior to departure: 100% charge of the total trip price. We strongly suggest you purchase travel insurance to protect yourself. Please contact our office for more details. Written cancellation is required and is effective when received by CI Destinations during normal business hours.

*C I Destinations (CID) a California LLC acts only as an agent for tour participants in arranging room accommodations, transportation, sightseeing, admissions and restaurants. CID reserves the right in its sole discretion to make changes to the itinerary and is not responsible to any person for expenses, loss of time, money or other happening resulting from a change of tour scheduling made for tour members. CID does not have any vested interest in any services, facilities and vehicles in relation to this trip and cannot guarantee or be held accountable for any actions or omissions of any agents, employees, etc. CID will make no refund in the event of delay, strike, overbooking, cancellations, bankruptcy, natural disaster, or for any part of the tour not utilized by the customer. These conditions are imposed by all suppliers and any other firms utilized in the tour. Currency, taxes, fees, and fuel surcharges are subject to change. CID reserves the right to decline/accept or retain any person as a member of a tour/cruise at its discretion. CID and/or its tour managers retain the right to require any participant to withdraw from a tour/cruise at any time if determined to be in the best interest of health, safety and general welfare of the tour/cruise group or of the individual participant. I/We agree any disputes concerning this contract or any material concerning this trip must be resolved exclusively pursuant to binding arbitration governed by CA law & subject to the jurisdiction of Fresno County. The cost of your trip has been calculated on currency exchange rate based on date of pricing and is subject to change if the USD weakens. CST 2111772-40.

Reservation Form

Roanoke Regional Chamber of Commerce

Ireland Trip | October 24, 2017

Name(s)

Passenger 1 (Name as it appears on your passport) _____

Date of Birth _____

Gender M F

Passenger 2 (Name as it appears on your passport) _____

Date of Birth _____

Gender M F

Address _____ City _____ State _____

Zip Code _____ Home Phone _____ Mobile Phone _____

Email Address _____

Payment Information:

Please make checks payable to CI Destinations

Reservations are on a first come first serve basis. Sign up early to secure your space.

Would you like to reserve a single room at \$450 supplement? (limited availability) Y N

Enclosed please find a deposit in the amount of _____ (\$450 per person) to secure reservations for _____ # of people.

By signing your name below, you are acknowledging that you have read and accept the terms and conditions detailed in the additional information section. Your deposit constitutes as a contract between the parties and acceptance of the foregoing terms and conditions.

Signature _____ Date _____

Please keep a copy of this completed form for your records & return the original to:

Roanoke Regional Chamber of Commerce | 210 S. Jefferson Street Roanoke, Virginia 24011 | (540) 983-0700