



Middleton Travel

CANCELLATION PENALTIES

All payments are non-refundable.

Phone: 608-831-4664

Fax: 608-831-2930

Travel Insurance

We cannot stress how important buying travel insurance is. If you would like pre-existing medical conditions covered, you must purchase the insurance within 14 days of signing up. Please call us at 608-831-4664 if you would like to purchase insurance. We can book it for you.

Please contact me Regarding Insurance

Decline Insurance

Identification

REQUIRED: Current US Passport is required.

Please provide a copy of your passport

Global # _____

Passport# _____ Exp _____

RESPONSIBILITY: Payment for this trip indicates acceptance of the condition that Middleton Travel, subsidiary of Middleton Travel, Inc., and the escort act only as agents for providers of transportation and/or other services for this trip, and are, therefore, not responsible for any loss, damage, injury, accident, delay, or irregularity caused by any reason whatsoever. Travel and/or other services for the trip, for which a reservation is requested on this form, are provided by the vendor, who are providing such services limited by general conditions or passage contracts, which hereby are incorporated and which are available on request. The right is reserved to make changes in the travel arrangements if it becomes necessary for the comfort or well being of the passengers, or for any other reason. In the unlikely event that a hotel is overbooked, MT reserves the right to move you to a hotel of equal or better value. Note: Pictures taken on this trip may be used on the company website or other collateral material.

The Jimmys in Punta Cana, Dominican Republic Reservation Application

Please mail your check with this form to:

Middleton Travel, ATTN: Amy Wilson

2831 Parmenter St., Suite 190, Middleton, WI 53562

Payments may be made by cash or check.

Please reserve space for The Jimmys in Punta Cana , Dominican Republic Feb. 26 - March 5, 2022

\$400 deposit, per person, is due upon confirmation

American Airlines Frequent Flyer # _____

Legal Name: _____ Date of Birth: _____ Gender: _____

(Please print full legal name as it appears on your current U.S. Passport)

Roommates Legal Name: _____ Date of Birth: _____ Gender: _____

(Please print full legal name as it appears on your current U.S. Passport)

How do you want your name to appear on your name tag? _____

Address _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____

Email: _____

Enclosed is: Cash: \$ _____ or Check: \$ _____ (make checks payable to Middleton Travel)

I understand that insurance is not included in the price of this trip, but available and recommended. I understand that purchase of insurance is a separate transaction and that it is my responsibility to do so in a timely fashion. Please sign below agreeing to all conditions of this reservation form.

Signature _____ Date _____