ITALY PLUS TOURS, LLC

Terms & Conditions Acceptance Confirmation Form

l,	(print your name), acknowledge that I wish
to participate in the following Italy Plus Tours tour:	
	(name of tour) to
	(list dates of tour).
Italy Plus Tours, LLC does NOT provide <i>travel insurance</i> to	· · · · · · · · · · · · · · · · · · ·
responsibility and personal choice to purchase travel insur	rance as noted in our Terms & Conditions (#12.)
I hereby confirm that I have read and understand Italy Plu	s Tours' Service and Sales Terms & Conditions,
listed at www.italyplustours.com (the "Terms"), and that	I accept, acknowledge, and agree to the Terms,
and agree to be bound by the Terms in their entirety.	
Print Name	
Time Name	
Signature	
Date	
OFFICE USE: Italy Plus Tours, LLC (initial)	
Date Waiver Received	
Date 50% Deposit Received / Amount	
Revised 1-1-24 IPT,LLC	

NOTE: **EACH** GUEST MUST COMPELTE AND SIGN THIS T&C FORM