

Irish Byways, LLC Traveler Information Form and Agreement
www.irishbyways.com

Welcome to Irish Byways Tours!

Please complete and return this Traveler Form with your \$500 down payment to Irish Byways LLC, 889 Grand Avenue, St Paul, MN 55105

Please keep a copy of your completed form for your own records.

Questions: 612.616.3782 or info@irishbyways.com

PERSONAL TRAVELER INFORMATION (please print)

Name: _____ Birth Date: _____

Home Address: _____

Mailing Address (if different): _____

Email: _____

Phone: _____ OR _____

EMERGENCY CONTACTS

Name and relationship, address, email, and phone number of two – three family members/friends who may serve as an emergency contact for you. Please alert these individuals to be attentive to phone and email messages from you while in Ireland.

1. _____

2. _____

3. _____

TRAVELER MEDICAL INFORMATION

All travelers must be in good health and enjoy an average or above average level of fitness. While walking is of moderate difficulty on some uneven and rocky terrain, pauses for interpretation allow for rest and enjoyment of scenes and photography along the way.

Primary Physician and Contact Information: _____

List and Describe any Medications, Health Issues, or Dietary Restrictions:

NOTE: Travelers must bring enough medication for the duration of the tour.

Health Insurance

Provider: _____

Health Insurance Account/Policy

Number: _____

PASSPORT

All Travelers must travel with a passport valid at least 6 months beyond their return date. Please make a copy of your passport and return it with this Form.

TOUR CHOICE

All tours are ten days in-Ireland, beginning on arrival date and excluding departure date.

To apply for a tour:

1. Notify us of your interest through our website, or call 612.616.3782, or email: info@irishbyways.com
2. If openings remain on your choice of tour, please complete and return our Traveler Information Form with your down payment of \$500 (non-refundable).
3. **Do not purchase your plane ticket until you are notified that the tour is advancing.**

Your choice of Tour:

Tour Name: _____

Tour Dates: _____

SECURING FLIGHTS:

- All tour participants must travel with a passport valid at least six months beyond their return date.
- Irish Byways, LLC meets travelers at the Shannon Airport and continues to offer transportation during the tour including returning travelers to the airport for departure at the end of the tour. Therefore, the tour begins at the Shannon Airport and ends at the Shannon Airport when travelers depart the tour.
- It is the responsibility of each traveler to secure their own roundtrip flight and the cost of the flight is NOT included in the tour fee. **IMPORTANT: Once you are notified by Irish Byways, LLC that your Traveler Information Form has been accepted and the group has been filled, you may then secure your flight.**
- Note that the departure and arrival dates are not the same when you secure an overnight flight, as you arrive the day after you leave the USA.
- Travelers are required to choose a flight with a morning arrival time on day one of the tour. If your flight is delayed, due to circumstances beyond your control, you are asked to contact Irish Byways, LLC through the first B&B on the list of B&Bs provided for you. Irish Byways LLC will meet you at the airport and provide taxi service to join the group at our first tour site/B&B overnight.
- Travelers shall provide a copy of the flight itinerary at least one month before departure date.

Your signature here indicates that you have read and understand this section on securing flights. If anything is unclear, please contact Irish Byways, LLC by sending an email to info@irishbyways.com or calling 612.616.3782 before signing.

Date: _____ Traveler Signature: _____

MISCELLANEOUS PROVISIONS

Travel Insurance (coverage *during* tour) Travelers are required to carry in-Ireland travel insurance to provide the level of protection needed if a medical emergency of any nature should arise. Such insurance is required for protection against unforeseen circumstances which may also cause you to cancel or interrupt your trip. **At the end of this Traveler Information Form is the description of the recommended Travel Guard “Platinum” Policy.** If you choose another insurance policy, it needs to offer a comparable level of protection covering the possibility for airlift, medical care and hospitalization in Ireland. It also must cover the possibility of an emergency flight for care or an emergency at home. **A copy of your travel insurance will be requested by Irish Byways, LLC one month before departure.** Irish Byways, LLC is a small business with limited tours and cannot bear the cost of such insurance for travelers. Your signature here indicates that you have read and understand this section on travel insurance. If anything is unclear, please contact Irish Byways, LLC by sending an email to info@irishbyways.com or calling 612.616.3782 before signing.

Date: _____ Traveler Signature: _____

ACCOMMODATIONS :

Your Choice of Accommodations:

- Single Room, with 15 Euros additional cost to traveler per night
- Room for two – circle: (twin beds) (dbl. bed) (either is fine)
- Room for three or four (always spacious)

My choice of roommate(s): _____

I am willing to be matched with another traveler yes no

NOTE: Travelers with sleep disorders that might disturb others are requested to reserve a single room or sleep outside with the fairies.

SMOKING, ALCOHOL, TOUR ETIQUETTE, LUGGAGE RESTRICTIONS:

Smoking is prohibited on all of our tours.

Alcohol: In Ireland, the Guinness is fine! Travelers who enjoy alcoholic beverages are asked to drink in moderation.

Etiquette: If the Tour Guide and Manager determine that inappropriate behavior of a traveler is interrupting or threatening the pleasure of the tour for other travelers, and a verbal warning is not heeded, Irish Byways, LLC reserves the right to terminate the contract with the traveler mid-tour at traveler’s expense. A traveler subject to termination shall receive no refund and shall arrange for personal travel arrangements for the remainder of the traveler’s time in Ireland.

Luggage Requirements: Each traveler is limited to one large piece of luggage (not over-sized!) plus a carry-on and other smaller items (such as a camera, hiking pack). Check our website for recommendations on packing for this tour.

Lost or Forgotten Luggage: Each traveler is responsible to be attentive to their own luggage on this tour especially when it is being transferred from one location to another, such as between a B&B and the bus. The tour cannot be delayed to return for forgotten items. **Travelers bear the full expense of having misplaced or lost luggage and other personal items returned to them throughout the tour.**

Your signature here indicates that you have read and understand this section on Accommodations and Smoking, Alcoholic Beverages, Etiquette, Luggage Requirements. If anything is unclear, please contact us info@irishbyways.com or 612.616.3782 before signing.

Date: _____ Traveler Signature: _____

TRAFFIC FLOW:

Traffic flows in opposite direction in Ireland. Consequently it is quite easy to look in the wrong direction for oncoming traffic when stepping into the street. Please be attentive and use caution in looking in both directions before entering a street on foot.

Note: This Note of Caution is not an exhaustive list of the potential risks travelers face when traveling. Travelers must be aware of their surroundings at all times and understand that they are assuming some risk of loss or injury when traveling and that said risk of loss or injury is beyond the control of Irish Byways, LLC.

Traveler hereby knowingly, voluntarily, and freely assumes the risks inherent with traveling in a foreign land and releases Irish Byways, LLC from any and all liability arising from loss, damage, injury, or death resulting from said travel and related travel activities.

Your signature here indicates that you have read and understand this section on Note of Caution. If anything is unclear, please contact us info@irishbyways.com or 612.616.3782 before signing.

Date: _____ Traveler Signature: _____

CANCELLATION POLICY

In the unlikely event that the tour is canceled due to circumstances beyond the control of Irish Byways, LLC, Irish Byways, LLC shall have no responsibility other than the reimbursement of the full refund of all deposits paid by travelers. Airfare and travel insurance will not be reimbursed or refunded by Irish Byways, LLC.

Your signature here indicates that you have read and understand this section on Cancellation Policy. If anything is unclear, please contact us info@irishbyways.com or 612.616.3782 before signing.

Date: _____ Traveler Signature: _____

TRAVELER PAYMENT SCHEDULE AND CANCELLATION OR SUBSTITUTION POLICY

Tour costs.

The tour cost is described on www.irishbyways.com
Questions: info@irishbyways.com or 612. 616. 3782

A \$500 down payment is due with the return of this Traveler Information Form & Agreement.

Credit cards or online payments are not accepted.
All payments only by check to Irish Byways LLC
Address: 889 Grand Avenue, St Paul, MN 55105

Each traveler agrees to this payment schedule:

1. \$500 due with Traveler Information Form
2. \$1,500 due three months before departure date; and
3. Balance due two months before departure date.

Any Traveler Information Form received later than two months before departure date must be accompanied with full payment.

Tour cancellation. If a traveler cancels participation in this tour, the following charges will be assessed:

- a. Canceling more than four months or 120 days before departure date: Full refund less \$500 down payment; and
- b. Canceling less than four months or 120 days before departure date: There is no refund. However: You may substitute a person in place of yourself for a \$150 administrative fee with the understanding that their arrival time is no later than noon on day one of the tour.

THERE ARE NO EXCEPTIONS OF ANY KIND.

Participation in this tour, constitutes acceptance of the above noted terms and conditions.

Your signature here indicates that you have read and understand this section on Cancellation Policy. If anything is unclear, please contact us info@irishbyways.com or 612. 616. 3782 before signing.

Date: _____ Traveler Signature: _____

Disclaimer and Release of Liability

Irish Byways, LLC is responsible for arranging all in-Ireland ground transportation, accommodations, and other services as offered by www.irishbyways.com

In traveling with Irish Byways, LLC I agree that Irish Byways, LLC shall not be liable for any injury, damage, death, loss, accident or delay to person or property in connection with any transportation, any off-path walking/ hiking, accommodations, or other services resulting directly or indirectly from any occurrence or condition beyond Irish Byways, LLC control, including but not limited to defects, breakdown of equipment, acts of God, acts of governments or other authorities, wars, or civil disturbances. I understand that traveling in a foreign land involves several inherent risks.

Irish Byways, LLC is not responsible for incidental or consequential losses or damages. It is understood that all accommodations, services, and facilities are subject to the laws and customs of the country(ies) in which these accommodations, services and facilities are rendered. Unforeseen conditions may necessitate tour changes and the right is reserved to make such changes and alter the tour as deemed advisable.

Services in connection with the in-Ireland trip are rendered by suppliers acting as independent contractors and not as agents or employees of Irish Byways, LLC. Irish Byways, LLC assumes no liability and makes no guarantees on behalf of independent contractors not employed by Irish Byways, LLC.

The laws, statutes, regulations, and Constitution of the State of Wisconsin, United States of America, shall govern any dispute or claim arising under this Application and Agreement. Traveler agrees to submit to the jurisdiction of St. Croix County, State of Wisconsin, United States of America (where this legal document was created) if any legal suit or administrative proceeding commences under this Form.

Your signature here indicates that you have read and understand this section on Disclaimer and Release of Liability. If anything is unclear, please contact us info@irishbyways.com or 612. 616. 3782 before signing.

Date: _____ Traveler Signature: _____

Please review your entire Traveler Information Form and Agreement and contact Irish Byways LLC if you have any questions before signing any portion of said document.