



Registration Form
ESU 2024 National Patron Tour
Veneto, Italy, September 21-27, 2024

Please complete and send this form with your tour deposit of \$2,000 per person, double; or \$3,000 per person, single (by check, American Express, Visa, MasterCard or Discover) to:
Rossana Ivanova, The English-Speaking Union of the United States, 144 East 39th Street, New York, NY 10016
Or by email to rivanova@esuus.org. Questions? Call (862) 224-4244

Please reserve _____ places for:

	<u>Tour Participant #1</u>	<u>Tour Participant #2</u>
Preferred Name(s):	_____	_____
E-mail(s):	_____	_____
Cell/Mobile:	_____	_____
Address	_____	
City	_____ State _____	Zip _____

A PASSPORT IS REQUIRED. Please provide the following information:

Passport Name	_____	_____
Passport Number (and citizenship if not USA)	_____	_____
Expiry:	_____	_____
Date of Birth	_____	_____

TOUR COST

The tour cost is based on accommodations in Due Torri Hotel in Verona in a **Classic** room (5 available) and Villa Michelangelo in Vicenza in a **Deluxe** room (7 available); on a per-person, double-occupancy basis.

Please note that the upgrade to a Deluxe Room in Due Torri Hotel will be mandatory once all the 5 Classic rooms are fully booked. An upgrade to a Suite in Villa Michelangelo will be mandatory once the 7 Deluxe rooms are fully booked.

SUBTOTALS

Per person, per person @ \$13,900 x _____ person/people	_____
Mandatory upgrade to Deluxe in Due Torri Hotel (Classic rooms are sold out)	_____ \$430
Mandatory upgrade to Suite in Villa Michelangelo (Deluxe rooms are sold out)	_____ \$385
Single supplement	ADD \$820 _____

HOTEL UPGRADE

Hotel Due Torri Upgrade three nights from Deluxe to:

Grand Deluxe	ADD \$360 _____
--------------	-----------------

This tour requires walking in varying degrees of exertion. In order to provide a positive experience for all tour participants, we must know in advance if any tour member has a condition or limitation that would hinder the pace of the tour.

Therefore we require that any tour member who has difficulty walking, notifies us of this immediately upon booking the tour so that we are able to provide for a helper with a wheelchair.

Helper with wheel chair	ADD \$1,740 _____
	TOTAL _____



For detailed descriptions of accommodation options, please see:

Hotel Due Torri: <https://hotelduetorri.duetorrihotels.com/en/luxury-hotel-5-stars-verona/rooms-suites-0>

Villa Michelangelo: <https://collezione.starhotels.com/en/our-hotels/hotel-villa-michelangelo-vicenza/rooms-and-suites/>

King Size Bed

Twin Beds

Non-Smoking

Smoking

DEPOSIT PAYMENT BY CHECK OR CREDIT CARD

\$2,000 person double occupancy, \$3,000 single

Note: Payment by credit card will incur a credit card convenience fee of 3.9%

___ Check enclosed (*payable to ESU USA*).

___ Please charge (provide card type and no.): _____

Expiry _____ Security Code _____

Name as it appears on the card (please print): _____

Signature _____

By ACH electronic transfer:

Chase, 533 Third Avenue, NY, NY 10016

Routing No. 021000021, Acct No. 722923262

Payments via Zelle:

Email: adifilippo@esuus.org

INTERNATIONAL AIRFARE

___ I understand that airfare is not included.

TRIP INSURANCE

___ I understand that trip insurance is not included, and that I am responsible for purchasing it (not required, but suggested). Information regarding coverage with USI Travel Insurance Services will be sent upon receipt of your registration.

Dietary Restrictions (medical): Please indicate specific food allergies or other medical dietary restrictions.

Is there a special occasion that you would like to celebrate during the tour (birthday, anniversary)?

In case of emergency contact:

Name _____ Relationship _____ Phone/email: _____

USE OF IMAGE I grant permission to the ESU to use my likeness and/or image in photographs, video, recordings, or any other record for legitimate purposes. ___ **Yes** ___ **No**

I/We have read the attached Terms and Conditions, and Release from Liability, Assumption of Risk, and Binding Arbitration Clause, and agree to all therein.

Signature: _____ Date: _____

Signature: _____ Date: _____

With specific questions about the tour, please contact Rossana Ivanova at rivanova@esuus.org