



TRAVEL DATE: 12/08/2025 TERRITORY: S9  
RES#: 1236217

**European Christmas Markets featuring  
Prague, Vienna & Budapest**

**For Reservations Contact:** John Kwak 850-645-6046 email: jkwak@fsu.edu

WFSU Public Media, 1600 Red Barber Plz, Tallahassee, FL 32310-6068

**A deposit of \$698 per person is due upon reservation. Reservations are made on a first come, first served basis. Reservations made after the deposit due date of June 02, 2025 are based upon availability. Final payment due by September 09, 2025. Deposits are refundable up until June 09, 2025.**

**YOUR INFORMATION:**

Clearly print your full name (first/middle/last) **as it appears on your government issued travel documentation.**

**IMPORTANT:** In order to avoid any unnecessary change fees, it is imperative that all guest names are entered correctly from the start. The information below must be the legal name and be 100% identical to the ID being used to travel <passport/driver's license> including middle names or suffixes <Jr, Sr>.

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Suffix: \_\_\_\_\_

Nickname: \_\_\_\_\_ Gender: ( ) Male ( ) Female Date of Birth: month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Expiration Date: (month/day/year) \_\_\_\_\_ Date of Issuance: (month/day/year) \_\_\_\_\_

City, State, Country of Issuance: \_\_\_\_\_ Citizenship: \_\_\_\_\_

**Should you become ill or injured, whom should we contact (not traveling with you):** \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**ROOMING WITH:**  Check if address is the same as Passenger #1

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ Suffix: \_\_\_\_\_

**AIR GATEWAY:** Departure airport for this tour: \_\_\_\_\_

Air Seat Request: ( ) Aisle ( ) Window ( ) Next To Traveling Companion

Collette cannot guarantee your seat preference. If you have not purchased air through Collette and wish to purchase transfers, you must transfer at our pre-scheduled times.

Please be advised, when travelling as part of a group, many airlines do not provide seat assignments. Preferred seating may be available for an additional charge.

Please reserve an upgrade to Elite Airfare for an additional rate of:  Premium Economy \$1,690  Business Class \$4,490

**Service is limited and not available on all flights or carriers. Other restrictions may apply. Please note: if you purchase an upgrade, we cannot guarantee the same flight schedule as the group. Upgraded class of service is for the international portion of the journey only.**

**Elite Air pricing (Premium Economy, Business Class, or First Class) is valid until 8 months prior to departure, after which rates are subject to change and will be quoted based upon availability.**

Are you willing to separate from the group air schedule to accommodate your upgrade request? ( ) Yes ( ) No

"Federal law forbids carriage of hazardous materials such as aerosols, fireworks, lithium batteries & flammable liquids aboard the aircraft in your checked or carry-on baggage. A violation can result in 5 years' imprisonment and penalties of \$250,000 or more. Details on prohibited items may be found on TSA's "prohibited items" web page: <http://www.tsa.gov/traveler-information/prohibited-items>."

**TRAVEL PROTECTION:** ( ) Yes, I wish to purchase travel protection \$549 ( ) No, I decline

If you choose not to purchase Collette's Waiver Insurance Plan, you will incur penalties for changes and cancellations. Travel Protection Payment is due with first deposit. The Waiver Fee does not cover any single supplement charges which arise from an individual's traveling companion electing to cancel for any reason prior to departure. The single supplement will be deducted from the refund of the person who cancels. (There is coverage under Part B which includes a single supplement benefit of \$1,500 for certain covered reasons. See Part B for details.)

**PLEASE MAKE CHECKS PAYABLE TO:** Collette ( ) Check ( ) Credit Card

Waiver/Insurance Amount: \$ \_\_\_\_\_ Deposit Amount: \$ \_\_\_\_\_ Total amount enclosed: \$ \_\_\_\_\_

Cardholder Name (if paying by Credit Card): \_\_\_\_\_

Cardholder Billing Address:  Check if address is the same as above \_\_\_\_\_

Cardholder Phone: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

**SIGNATURE REQUIRED** for acceptance of the below conditions and agreement to credit card use:

\_\_\_\_\_  
Date: \_\_\_\_\_

I agree to pay according to the card issuer agreement. I understand and accept the cancellation policy, terms and conditions. See <http://www.gocollette.com/about-collette/terms-and-conditions> for full terms and conditions of your purchase.

**Important Conditions:** Your price is guaranteed once deposit is received and booking confirmed by Collette. Your price is not subject to increase after the deposit is received and booking confirmed, except for charges resulting from increases in government-imposed taxes or fees.