



Central Holidays
Since 1972 A Company of Styl



REGISTRATION FORM

GROUP BOOKING #: G004510

WSB TITANX1000 EGYPT SEPTEMBER 5 - 12, 2022

PLEASE PRINT— NAMES MUST BE LISTED AS THEY APPEAR ON YOUR PASSPORT

To register, complete the form below and return it, along with a clear copy of your passport information page by **August 10, 2022, 12PM PT** to Group Operations at **GROUPOPERATIONS@CENTRALHOLIDAYS.COM** or **FAX NUMBER: 201-228-5240**

Primary

Passenger 1: _____ Date of Birth: _____ M / F

First Name

Middle Name

Last Name

Street Address: _____

City: _____ State/Province: _____ Zip: _____

Email Address: _____ Home Ph#: _____ Business/Cell Ph#: _____

Passport#: _____ Country of Issue: _____ Date Issued: _____ Expiration Date: _____

Agent Code: _____ SMD: _____ CEO: _____

Passenger 2: _____ Date of Birth: _____ M / F

First Name

Middle Name

Last Name

Passport#: _____ Country of Issue: _____ Date Issued: _____ Expiration Date: _____

Agent Code: _____ SMD: _____ CEO: _____

☐ If possible, please reserve me as single occupancy (limited availability). ☐ I am interested in flight accommodations from airport/city: _____

Notes: _____

If registering more than 2 passengers, one form may be used for payment, and additional forms for passenger information.

LAND PRICES (per Person):

Based on Double Occupancy

_____ Nile Cruise & Cairo.....\$1,959

_____ Child (6-11.99 yrs).....\$1,372

(30% discount if sharing room with 2 adults)

_____ Child (0-5.99 yrs).....\$294

(85% discount if sharing room with 2 adults)

_____ Cairo only.....\$1,129

_____ Child (6-11.99 yrs).....\$791

(30% discount if sharing room with 2 adults)

_____ Child (0-5.99 yrs).....\$170

(85% discount if sharing room with 2 adults)

☐ I am a single passenger requesting single occupancy.
(Additional cost for Single: Cruise & Cairo = \$878; Cairo only = \$379)

OPTIONAL TOURS:

See TitanX Egypt Itinerary for details

☐ Full Day Abu Simbel by Bus (AM Tour)

\$120 per adult / \$80 per child

☐ Nubian Village Tour (PM Tour)

\$79 per adult / \$39 per child

☐ Philae Temple (AM Tour)

\$75 per adult / \$35 per child

☐ Giza Pyramids Sound & Light Show (PM Tour)

\$99 per adult / \$49 per child

TRAVEL PROTECTION:

HIGHLY RECOMMENDED

I want Trip Cancellation & Interruption Insurance:

☐ Yes ☐ No

Insurance Premium Rates per Person:

_____ \$76 for tour costs from \$750.01 - \$1,000

_____ \$91 for tour costs from \$1,000.01 - \$1,250

_____ \$105 for tour costs from \$1,250.01 - \$1,500

_____ \$121 for tour costs from \$1,500.01 - \$1,750

_____ \$133 for tour costs from \$1,750.01 - \$2,000

_____ \$160 for tour costs from \$2,000.01 - \$2,500

_____ \$191 for tour costs from \$2,500.01 - \$3,000

_____ \$221 for tour costs from \$3,000.01 - \$3,500

_____ \$252 for tour costs from \$3,500.01 - \$4,000

The policy price is based on the total cost of the tour, including taxes. The Insurance Premium must be paid with your deposit. Central Holidays strongly recommends protecting your investment with our optional travel insurance. For more information on the policy, please call CSA at 800.983.9554 visit www.csatravelpro.com. Plan code: G-Tour03

LAND PRICE TOTAL:	+	OPTIONAL TOUR TOTAL:	+	TRAVEL PROTECTION TOTAL:	=	TOTAL COST:

PAYMENT METHOD & REQUIREMENTS: Full Payment is due at the time of registration (100% Non-Refundable)

Payments by Check: Please make checks payable to CENTRAL HOLIDAYS

Mailing Address: 250 Moonachie Road (Suite 300), Moonachie, NJ 07074.

Payments by ACH/WIRE: (Please use the following Bank Information)

Beneficiary: CENTRAL HOLIDAYS Inc.

Address: 250 Moonachie Road, Moonachie, NJ 07074

ACH/WIRE Information

Bank Name: JP Morgan Chase Bank, N.A

Account Number: 6104734179

WIRE ABA/Routing No: 021000021

Swift Code: CHASUS33

CREDIT CARD:



Credit Card# _____ Security code#: _____ Exp. date: _____

Name that appears on the card: _____ Signature: _____

I authorize \$ _____ to be charged to my card (including insurance premium if applicable)

CANCELLATION POLICY:

100% NON-REFUNDABLE AT TIME OF REGISTRATION

Note: A person becoming a single as a result in the roommate's cancellation must pay the additional single supplement costs.

Signature: _____ Date: _____

I have read the schedule of activities for WSB TITANX1000: Egypt - September 2022 and have read and accept the general information and General Terms & Conditions outlined by Central Holidays. Please note the program schedule may be subject to changes.