

CHARTER OPERATOR - PARTICIPANT AGREEMENT

In accordance with Department of Transportation (D.O.T.) regulations, this booking form must be signed and sent with payment at time of booking for passengers traveling on charter air (Exclusive Vacation Flights). TRAVEL AGENT: YOU MUST SUBMIT THIS ENTIRE DOCUMENT and give copy to client.

Please mail to: Apple Vacations, ATTN: Customer Care, 7 Campus Blvd., Newtown Square, PA 19073. Or, email to: customer care@applevacations.com

I (we) have read and I agree to the above terms and conditions forming this Fair Trade Contract/Charter Operator-Participant Agreement. Agreed

Booking Number _____

First Name _____

Last Name _____

Street, City, State, Zip _____

() _____

Telephone Number _____

Departure Date: _____

Return Date: _____

Duration (# of nights): _____

Departure Airport: _____

Destination: _____

Hotel/Tour Name: _____

Cost of trip: \$ _____

Payment covers: Deposit \$ _____

Full Payment \$ _____

Signature: _____

Date: _____