

Trip Commitment
Disney World
April 14-18, 2020
Please return this response by September 27, 2019

A \$325 non-refundable deposit is due by October 1, 2019.

I understand that there are NO refunds should my son/daughter be removed or dropped from the trip for ANY reason. This includes being removed by school administration.

Please initial your understanding of this paragraph

_____ Parent's initials _____ Student's initials

My child WILL NOT be attending the trip to Disney World:

Parent's Signature: _____ Date: _____

My son/daughter WILL participate in the Disney Trip:

Student's Name: _____

Grade: _____

Student is a member of: _____ Marching Band _____ Chorus

Student Cell Phone Number: _____

Parent's Email: _____

Parent's Cell Phone Numbers: _____

All parents and students must join the Remind App: <http://rmd.me/b?rid=67051681>

We have chosen _____ to purchase _____ not to purchase trip insurance. Application with a separate check for \$42 students/\$65 chaperones, plus \$7 service fee per enrollment form (payable to Travel Guard) is included with this trip commitment and trip deposit. We acknowledge that the Mars Area Band Boosters will not be responsible for any reimbursements should the student be removed, FOR ANY REASON, at any time, before or during the trip.

If a student violates any Mars School District rule – drinking, use of drugs, absenteeism from check-on, violation of room rules, immoral behavior, etc., and the parent will be contacted by the Director(s). Upon a student's removal from the trip, the parent will be required, at their expense, to provide financial responsibility and arrangements to have their child returned home. There will be no refund of money should a student be removed from the trip for disciplinary reasons.

Parent's Signature: _____ Date: _____

Student's Signature: _____ Date: _____

Marching Band/Chorus Trip Disney April 14-18, 2020

To Mars High School Marching Band/Chorus Parents and Students:

A spring trip has been planned for the Mars Area Marching Band and High School Chorus to travel to Disney World. The spring trip will provide performance opportunities for both ensembles, as well as valuable educational opportunities. **The tentative all-inclusive price will be \$1300 – pending the cost of airline tickets and other miscellaneous expenses.** Please take careful consideration as to whether your child will be attending the trip and return the attached sign-up page with your response by September 27, 2019. If attending, a non-refundable deposit of \$325 is required by October 1, 2019 to secure your airline ticket and place on the trip.

Trip Payment Schedule:

Payment #1: \$325 – Due October 1, 2019

Payment #2: \$325 – Due November 15

Payment #3: \$325 – Due January 30

Final Payment: March 9, 2020: Final balance due - specific amount TBD

Each payment is nonrefundable – at the conclusion of the trip if a student/chaperone decides not to go, a partial refund for payments 2, 3, and 4 MAY be given.

All checks will be made payable to the Mars Area Band Boosters, Inc.
Memo – Student name/group/Disney Trip

Chaperones:

Parents wishing to be a chaperone for this trip should fill out the response form and return with a non-refundable payment of \$325. Please be sure that you have completed all necessary paperwork to be an "Independent Volunteer" with the Mars Area School District by December 1, 2019. Failure to complete all the necessary steps will exempt you from the trip with no refunds.

Jennifer Kennedy, High School Chorus, jkennedy@marsk12.org

Dave Soose, Marching Band, marchingdirector@marsband.com

Ruth O'Donnell, President, Mars Marching Band Boosters, president@marsband.com

Lori MacDonald, Treasurer, Mars Marching Band Boosters, treasurer@marsband.com

Travel Guard®

TRAVEL INSURANCE ENROLLMENT/APPLICATION FORM

1 ENROLLMENT/APPLICATION

TRAVELER #1:

*First Name _____

*Last Name _____ *Middle Initial _____

*Gender _____

*Address 1 _____

*Address 2 _____

*City _____

*State/Province _____ *Zip/Postal Code _____

Phone () _____

*Email _____

Beneficiary _____

*Destination Country USA

*Destination State/Province FL

*Airline SOUTHWEST

*Cruiseline N/A

*Tour Operator SPECIALTY TRAVEL & TOURS

*Car Rental Provider N/A

*Trip Deposit Date / /

*Departure Date / / *Return Date / /

Thomas PRESTO 133482
Agent Name/Initials AGENCY CODE

*Required Information

For more information: Contact your travel agent or complete and mail in this enrollment/application form to:

AIG Property Casualty
3300 Business Park Drive
Stevens Point, WI 54482

2 PLAN COST CALCULATION*

☐ BASIC

☒ SILVER

☐ GOLD

☐ PLATINUM

TRAVELER NAME	BIRTH DATE	TRIP COST	PLAN COST
#1	/ /		
#2	/ /		
#3	/ /		
#4	/ /		
			\$7 SERVICE FEE
TOTAL			

* For more information, please contact your travel agent. All travelers listed on this plan must reside at the same address. If any travelers reside at a different address, a separate policy must be purchased.

3 PAYMENT INFORMATION

☐ Check or Money Order Payable to Travel Guard

☐ American Express®

☐ MasterCard®

☐ VISA®

☐ Discover/Novus®

Expires /

Name of Cardholder _____

Please review the Certificate of Insurance/Policy provided with this enrollment form or at: www.travelguard.com/xxx for full terms, limitations, and exclusions.

☐ I acknowledge that I have read, understand, and agree to the terms and conditions of this coverage as detailed in the Certificate of Insurance or Policy.

Signature _____

Date _____

5/1/14 EN

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.
Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038



THIS IS A BRIEF OUTLINE OF COVERAGE — RESTRICTIONS APPLY

Coverage varies by state. For complete coverage information, please refer to the Certificate of Insurance or Policy for your state of residency prior to purchase by visiting www.travelguard.com/fulfillment.

Travel Insurance Coverage

Trip Cancellation/Trip Interruption: Reimburses forfeited, non-refundable, unused payments or deposits up to the Maximum Limit shown on the Schedule of Benefits for Trips that are canceled or interrupted due to covered reasons such as: Sickness, injury, or death of you, a Family Member, Traveling Companion, or Business Partner; Financial Default of an airline, cruise line, or tour operator when coverage is purchased within 15 days of initial trip payment; Inclement Weather; Strike; Primary Residence or Destination being made Uninhabitable; Being subpoenaed, required to serve on a jury, hijacked, or quarantined; Military service; a Terrorist Incident; and involuntary termination of employment or layoff. For a complete list of covered reasons, refer to the Certificate of Insurance or Policy.

Trip Interruption — Return Air Only: Reimburses the additional airline transportation expenses incurred by you to reach the return destination for trip interruptions.

Trip Delay: Reimburses up to \$100 per day/per person up to the Maximum Limit shown on the Schedule of Benefits for Reasonable Additional Expenses if the Insured is delayed for more than 12 consecutive hours due to a covered reason.

Baggage Insurance Coverage

Baggage & Personal Effects: Can reimburse you if your baggage or personal effects are lost, stolen or damaged while on your Trip, subject to the Maximum Benefit. This coverage is in excess of any other coverage or indemnity.

Baggage Delay: If your Baggage is delayed more than 24 hours, you can be reimbursed for the purchase of Necessary Personal Effects, subject to the Maximum Benefit.

Medical Expense & Other Insurance Coverage

Accident Sickness Medical Expense: Pays up to the Maximum Benefit shown in the Schedule of Benefits for necessary medical expenses due to Injury or Sickness incurred while on a Trip. Initial treatment must be received while on a Trip with a Destination of at least 100 miles from the Insured's Primary Residence. This coverage is in excess of any other coverage or indemnity.

Emergency Evacuation & Repatriation of Remains: Covers evacuation and transportation as directed by a Physician to the nearest adequate medical facility (home in the event of death or if medically required). Injury or Sickness requiring evacuation must occur while on a Trip with a Destination of at least 100 miles from the Insured's Primary Residence. Pays for special medical escort if recommended in writing by the attending Physician.

Optional Coverages

Flight Guard™: Coverage for accidental death or dismemberment that occurs when traveling on a regularly scheduled flight or charter, subject to the Maximum shown in the Schedule. Amount selected from the minimum of \$100,000 up to a maximum of \$500,000. (Not available for NH and MT residents.)

Car Rental Collision Coverage: \$35,000 in primary coverage, subject to \$250 deductible. Covers physical damage to a rental car for which the car rental contract would hold you responsible. (Not available for KS or TX residents.)

Emergency Evacuation Upgrade: Valuable addition to increase your coverage. Your Emergency Evacuation benefit will double.

This plan provides insurance coverage that only applies during the covered trip. You may have coverage from other sources that provides you with similar benefits but may be subject to different restrictions depending upon your other coverages. You may wish to compare the terms of this policy with your existing life, health, home, and automobile insurance policies. If you have any questions about your current coverage, call your insurer or insurance agent or broker. Coverage is offered by Travel Guard Group, Inc (Travel Guard). California lic. no. 0B936006, 300 Business Park Drive, Stevens Point, WI 54482, www.travelguard.com. CA DOI toll free number: 800-927-HELP. This is only a brief description of the coverage(s) available. The Policy will contain reductions, limitations, exclusions and termination provisions. Insurance underwritten by National Union Fire Insurance Company of Pittsburgh, Pa., a Pennsylvania insurance company, with its principal place of business at 175 Water Street, 15th Floor, New York, NY 10038. It is currently authorized to transact business in all states and the District of Columbia. AIC No. 19445. Coverage may not be available in all states. Your travel retailer may not be licensed to sell insurance, and cannot answer technical questions about the benefits, exclusions, and conditions of this insurance and cannot evaluate the adequacy of your existing insurance. The purchase of travel insurance is not required in order to purchase any other product or service from the travel retailer. Travel assistance services provided by Travel Guard.

Assistance Services

Assistance Services are arranged by Travel Guard and provided through coordination, negotiation, and consultation using an extensive network of worldwide partners. Expenses for goods and services provided by third parties are the responsibility of the customer.

Travel Medical Assistance: A menu of services available for emergency medical requests, including prescription replacement assistance, physician referrals, medical evacuations, and more.

Worldwide Travel Assistance: Assistance with any travel emergency or request for general travel information, including lost, stolen or delayed baggage; replacing lost passport or travel documents; emergency cash transfers; pre-trip travel advice; inoculation information and more.

LiveTravel® Emergency Assistance: 24-hour hotline to make emergency travel changes, such as rebooking flights, hotel reservations, tracking lost luggage and more.

Concierge Services: Whatever you need, whenever, wherever you need it, you can call on your own personal assistant to help. Services include tee time reservations, restaurant referrals and reservations, wireless device assistance, sporting or theater tickets, and more.

Personal Security Assistance: Assistance to help maintain personal safety and personal information while traveling. Services include evacuation assistance, 24/7 access to security and safety advisories and more.

Notice to residents of AK: The 15 day purchase rules will be 21 days.

Notice to residents of MT: The following benefits are not available: Optional Flight Guard, Emergency Evacuation Upgrade.

Notice to residents of NY: The following benefit is not available: Emergency Evacuation Upgrade.

Notice to residents of AK, IL, IN, KS and MI: Baggage & Personal Effects coverage is primary.

Notice to residents of AK, CT, IL, IN, KS, MT, SD, TX and WA: Accident Sickness Medical Expense coverage is primary.

PRE-EXISTING MEDICAL CONDITION EXCLUSION:

The Company will not pay for any Loss or expense incurred as the result of an injury, Sickness, or other condition of you, a Traveling Companion, Business Partner, or Family Member which, within the 180-day period immediately preceding and including your coverage effective date: (a) first manifested itself, worsened, became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care, or treatment; (b) for which care or treatment was given or recommended by a physician; or (c) required taking prescription drugs or medicines, unless the condition for which the drugs or medicines are taken remains controlled without any change in the prescription drugs or medicines.

PRE-EXISTING MEDICAL CONDITION EXCLUSION WAIVER:

The Company will waive this exclusion if you meet the following conditions: 1. You purchase the plan within 15 days of making your initial trip payment; 2. The amount of Trip Cancellation coverage purchased must equal the full cost of all prepaid, non-refundable payments or deposits applicable to the Trip at the time of purchase and the cost of any subsequent arrangement(s) added to the same Trip must be insured within 15 days of the date of payment or deposit for any subsequent Trip arrangement(s); 3. You must be medically able to travel when you pay your plan cost; 4. The Trip Cost does not exceed \$100,000 per person (only applicable to Trip Cancellation/Interruption).