

RESERVATION FORM:

NATURE FORWARD ~ ICELAND

26EUA0802/NF

Enclosed is my deposit for \$ _____ (\$3,000 per person) to hold _____ place(s) on the trip to Iceland with Nature Forward departing August 2, 2026. Check Your Journey at a Glance for all costs associated to this tour.

Final payment due date is **April 29, 2026**

Please make check payable to CLASSIC ESCAPES, 191 W Poplar Street, Floral Park, NY 11001 OR

Charge deposit to: ☐ MasterCard ☐ Visa ☐ American Express ☐ Discover

(Credit Card Authorization form needs to be completed and returned to Classic Escapes via mail or fax to 718-204-4726)

Deposits can be made by credit card; however, **all final payments are required to be made by check or money order only.**

A copy of your passport must accompany this form to confirm reservation. Upon receipt of your signed reservation form, passport copy and deposit we will, subject to availability, reserve your spot on the tour. Passport must be valid for at least 6 months after the return of your trip and have four consecutive blank pages in the visa section

1) NAME (As appears on passport): ☐ Mr. ☐ Mrs. ☐ Ms. _____ DOB _____

2) NAME (As appears on passport): ☐ Mr. ☐ Mrs. ☐ Ms. _____ DOB _____

WHAT NAME YOU PREFER TO BE CALLED IF DIFFERENT FROM ABOVE: 1) _____ 2) _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONES: HOME: () _____ OFFICE: () _____ MOBILE: () _____

E-MAIL ADDRESS: _____ FAX: () _____

- ☐ I certify that I have not recently been treated for, nor am I aware of any physical or other condition or liability that would create a hazard to myself or the other members of this tour.
- ☐ The two of us above are sharing a room and, where possible, would like a room with: ☐ ONE ☐ TWO Beds (Make one selection only)
- ☐ I am sharing with _____ (form sent separately)
- ☐ I need assistance in securing a roommate. I understand if one cannot be located for me by final payment date, I agree to pay the additional single supplement amount listed on the Journey at a Glance page. I prefer to share with: ☐ Smoker ☐ Non-smoker
- ☐ I desire single accommodations, if available, and will pay the single supplement additional cost

I/We wish to participate on the optional activities at an additional cost (**currently subject to change**).

- ☐ Reykjavik Premium Whale Watching
- ☐ Reykjavik Premium Puffin Tour

CLASSIC ESCAPES CAN ASSIST WITH INTERNATIONAL FLIGHT ARRANGEMENTS FROM ANY US CITY.

- ☐ YES, I WILL REQUIRE ASSISTANCE. PLEASE SEND ME INFORMATION TO DEPART FROM _____
- I REQUIRE: ☐ ECONOMY ☐ BUSINESS/FIRST CLASS

We'd love to send you exclusive offers and the latest news from our partners around the world. We'll always treat your personal details with the utmost care and will never sell them to other companies for marketing purposes. ☐ **No thanks, I don't want to hear about offers and news.**

All rates quoted are based on tariffs and value of foreign currencies in relation to the U.S. dollar in effect as of July 1, 2024 and are subject to change. Refund is made less any cancellation charges levied in accordance with the policy outlined in the accompanying Conditions of Travel. **WE STRONGLY RECOMMEND THAT YOU OBTAIN TRAVEL INSURANCE. RESERVATIONS ARE ACCEPTED SUBJECT TO TOUR CONDITIONS AND WILL BE CONFIRMED ONLY IF ACCOMPANIED BY COMPLETED FORM SIGNED BY THE TOUR PARTICIPANT(S).**

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

CLASSIC ESCAPES INC.

191 W Poplar Street, Floral Park, NY 11001

(We recommend that you keep a copy of your selections as noted above for your future reference)

NATURE FORWARD ~ ICELAND
AUGUST 2 TO 14, 2026



CREDIT CARD PAYMENT AUTHORIZATION

Please Note: If you wish to charge your deposit to Visa, MasterCard, American Express or Discover, this authorization form MUST be completed and returned to us along with your reservation form before we can process your application.

I authorize (**Classic Escapes Inc.**) to charge my VISA/MASTERCARD/DISCOVER/AMEX listed below:

Name appearing on credit card

Card number Expiration date

Card Verification Number* Card Type

Billing address of credit card

Amount of transaction

Services rendered/Items purchased

Phone number

Signature Date

***How To Locate Your Card Verification Number:**

(Visa, MasterCard, Discover: Locate the credit card number on the back of the card above the signature box. Enter the 3-digit number which follows the credit card number. **American Express:** Enter the 4-digit number found directly above and to the right of the credit card number.)

I understand that all rates quoted on this tour I'm making a payment on are based on tariffs and value of foreign currencies in relation to the U.S. dollar in effect as of July 1, 2024, and are subject to change Cancellations are only effective on receipt of written notification. The following per person fees are applicable on this tour:

- Up to 179 months prior to departure (April 28, 2026), \$300 per person administrative fee., plus \$1,000 non-refundable deposit given to suppliers.
- 95 days to 76 days prior to departure (April 29 to May 18, 2026), deposit is forfeited.
- 75 days to 60 days prior to departure (May 19 to June 3, 2026), 25% refund is possible.
- 59 days or less prior to departure (June 4, 2026), no refund is possible.

These cancellation fees are also in addition to any fees imposed by airlines.

PLEASE NOTE: At times, our bank requires photocopy of credit card (both sides) and driver's license or document showing signature of cardholder, in order to process the charge. While it is not required at this time that you include these materials with your deposit, if our bank requests it, we will contact you for these copies.