



Travel Insurance Waiver

Travel insurance provides a valuable benefit to protect you from the unexpected. We want to ensure that your travels are only filled with happy and picturesque memories.

For that reason we will need you to read and understand the insurance offers whether from the vendor or third party.

We **strongly** recommend you purchase travel insurance.

If you choose to decline all offered protections, you assume any and all personal, mental and financial losses.

Please complete and return this form by the requested date below.

Lead Traveler's Full Name: _____

Travel Consultant's Name: _____

Travel Date: (MM/DD/YYYY) _____

Vacation Supplier: _____

Please initial by your choice and Sign Below

____ Yes, I choose to purchase offered travel insurance (Must purchase by MM/DD/YYYY)

____ No, I decline to purchase travel insurance and accept the terms.

____ Please contact me with more insurance information.

I hereby agree to the terms of the above and hereby understand coverages offered of declined and understand the consequences of changes and/or cancellations.

Lead Traveler Signature

Date

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