Woods Travel Limited

INSURANCE DISCLAIMER (OWN INSURANCE)

TOUR NAME: Chichester Cathedral Friends / Historic Ile de France

REFERENCE NUMBER & DEPARTURE DATE	: EP25171 - 03 October 2025
The booking conditions of most tour operators r Such insurance should ensure that you are fully expenses arising abroad, loss of luggage or mo	
I acknowledge that a member of staff has expla insurance cover in respect of my holiday booking	
I understand that if my holiday includes any Channel Islands, Isles of Scilly, Ireland or Ma to obtain adequate travel insurance for my b	ainland Europe, that I am required by Woods
booking form. I therefore agree to indemnify you	or those individuals whose names appear on the ur company against any expense, which anyone in uate insurance protection with effect from today.
NAME OF INSURER:	
POLICY NUMBER:	
EMERGENCY ASSISTANCE COMPANY:	
& THEIR TELEPHONE NUMBER:	
NAME OF PASSENGERS :	
SIGNED:	DATE:
(Signature of person who is lead name on the b	ooking form)
WWW.WOO	dstravel.co.uk

For us to accept your booking, you must complete and sign one or both sides of this form and return it to Woods Travel.

Woods Travel Ltd, Park Road, Bognor Regis, West Sussex, PO21 2PX Telephone: 01243 868080 info@woodstravel.co.uk

PTO

Woods Travel Limited

INSURANCE DISCLAIMER (NO INSURANCE)

TOUR NAME: N/A		
REFERENCE NUMBER & DEPARTURE DATE: N/A		
The booking conditions of most tour operators require you to obtain adequate holiday insurance. Such insurance should ensure that you are fully covered against cancellation charges, medical expenses arising abroad, loss of luggage or money and personal liability claims.		
I acknowledge that a member of staff has explained to me the importance of having adequate insurance cover in respect of my holiday booking no matter the destination (including UK).		
I acknowledge that if I cancel my holiday booking, for any reason, I will be subject to the cancellation charges according to the Woods Trading Charter (and Booking Conditions).		
My holiday does not include any of the following destinations: Isle of Man, Channel Islands Isles of Scilly, Ireland or Mainland Europe.		
That being the case, I have decided not to protect my booking with travel insurance for the following individuals whose names appear on the booking form.		
NAME OF PASSENGERS :		
I therefore agree to indemnify your company against any expense, which anyone in my party may incur as a result of having inadequate insurance protection with effect from today.		
SIGNED: DATE:		
(Signature of person who is lead name on the booking form)		
www.woodstravel.co.uk		

Woods Travel Ltd, Park Road, Bognor Regis, West Sussex, PO21 2PX Telephone: 01243 868080

info@woodstravel.co.uk

For us to accept your booking, you must complete and sign one or both sides of this form and return it to Woods Travel.

PTO