

## **Landscape Painting in Southern France**

*Tour dates:* September 16 - 26th, 2015

### **Registration Form**

Please complete, sign and mail this application to secure a space on the tour. Your reservation will be confirmed only after receipt of this form and a \$950 deposit per person. Please use one form per person.

#### **Participant Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

### **Fees & Payment**

**Fee: \$3,600 (Double Occupancy). Single Supplement: \$750.** \$950 deposit required per person. Remaining balance is due no later than May 11, 2015. Payment in full is due if reservation is made after May 11, 2015.

Please make check payable to Montfaucon Tours, or to pay by credit card, please contact Montfaucon Tours directly at (415) 331-9641, or online at [www.montfaucontours.com](http://www.montfaucontours.com)

### **Emergency Contact Information**

In case of emergency, please notify: \_\_\_\_\_ Relationship: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*Alternate contact, if 1<sup>st</sup> contact not available:* Notify: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

### **Diet & Health Conditions**

Please list any dietary restrictions: \_\_\_\_\_

Please list any health problems, including snoring \_\_\_\_\_  
\_\_\_\_\_

**By submitting this reservation form and a \$950 deposit, I agree to all Terms and Conditions.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# Plein Air Journeys Terms and Conditions

## **Responsibility and Release of Liability**

I agree to hold harmless Plein Air Journeys LLC (the "Company") and all of its agents, successors, and assignees and hereby release and discharge Plein Air Journeys LLC, and its agents, venders and assigns from any and all liability arising from my participation in the Landscape Painting Workshop September 16 - 26th, 2015. This release will be legally binding upon myself, my heirs, successors, assigns and legal representatives; it being my intention to fully assume all risk of travel and to release Plein Air Journeys LLC from any and all liabilities to the maximum permitted by law.

As a participant in this artist workshop, I agree to take reasonable precautions to prevent injury to myself, my property, my non-participating spouse/guest and/or minors accompanying me; and freely agree to assume all responsibilities for any and all risks of damage or injury that may occur to me, my non-participating spouse/guest, minors staying with me, or my property resulting from or arising out of, or incident to, my participation in the Plein Air Journeys LLC painting workshops.

I furthermore understand that Montfaucon was not built or designed to incorporate all safety features found in modern buildings. Installation of such equipment would compromise the integrity of the building. I agree to take reasonable precautions to prevent injury to myself, my property, my non-participating spouse/guest and minors staying with me at Montfaucon. I acknowledge that my responsibilities include, but are not limited to, supervising all minors staying with me at Montfaucon. As a condition of receiving accommodations at Montfaucon, I voluntarily and freely agree to assume all responsibilities for any and all risks of damage or injury that may occur to me, my non-participating spouse/guest, minors staying with me, or my property resulting from or arising out of, or incident to, my stay at the Montfaucon. I hereby voluntarily and freely release and discharge Plein Air Journeys LLC and all of its members, agents, venders, successors, and assignees from any and all claims, damages, and rights of action that I, my non-participating spouse/guest, minors staying with me, my heirs, my executors, and my administrators now have or may hereafter have for any injury to me, my non-participating spouse/guest, minors staying with me, or my property resulting from or arising out of, or incident to, my participation in the Plein Air Journeys LLC Workshop and my stay at Montfaucon, including, but not limited to, any claims of damages or injury that might result from the negligence, actions, or omissions of any agent, vender or assignee of the Company.

Plein Air Journeys LLC reserves the right to decline, accept or retain at any time any person as a participant of the workshop as well as to remove any participant from a workshop should Plein Air Journeys determine that the participant is disruptive to the workshop. In the event that a participant is removed from the workshop, or in the event that a traveler voluntarily chooses to leave a workshop, monies will not be refunded.

**Insurance:** Plein Air Journeys is not responsible for expenses incurred for canceled trips such as airline tickets, cost of trip insurance, costs due to travel delays, flight cancellation, illness or personal emergency. Plein Air Journeys LLC is not responsible for any baggage or personal effects of any individual participating in the tours / trips arranged by Plein Air Journeys LLC. Individual travelers are encouraged to purchasing a travel insurance policy, that will cover the expenses associated with the loss of luggage or personal effects, travel delay and trip cancellation. All participants are required to carry medical or health insurance.

**Medical:** Any participant with a physical disability or limitation must be listed at time of registration. Any special medications must be supplied by participant as determined by his/her physician.

Initial: \_\_\_\_\_

**Disclaimer**

Plein Air Journeys LLC and its affiliated entities and its employees, shareholders, officers, directors, successors, agents, and assigns, neither own nor operate any person or entity which is to, or does, provide goods or services for these trips or tours. Because Plein Air Journeys LLC does not maintain any control over the personnel, equipment, or operations of these suppliers Plein Air Journeys LLC assumes no responsibility for and cannot be held liable for any personal injury, death, property damage, or other loss, accident, delay, inconvenience, or irregularity which may be occasioned by reason of:

1. any wrongful, negligent, willful, or unauthorized acts or omissions on the part of any of the tour suppliers, or other employees or agents
2. any defect in or failure of any vehicle, equipment, instrument owned, operated or otherwise by any of these suppliers,
- 3 any wrongful, willful, or negligent act or omissions on any part of any other party not under the supervision or control of the company.

Plein Air Journeys LLC acts only as an agent for the various independent suppliers that provide hotel accommodations, transportation, sightseeing, activities, or other services connected with this tour. Such services are subject to the terms and conditions of those suppliers. Responsibility is not accepted for wars, terrorist acts, acts of nature, local laws or other such causes. All services and accommodations are subject to the laws and regulations of the country in which they are provided. Plein Air Journeys LLC is not responsible for any baggage or personal effects of any individual participating in the tours. Individual travelers are encouraged to purchasing a travel insurance policy, that will cover some of the expenses associated with the loss of luggage or personal effects, travel delay and trip cancellation. All participants are required to carry medical or health insurance.

**Deposits and Cancellation**

All deposit payments are nonrefundable, unless workshop is cancelled due to low enrollment. There is no refund for partial or unused land arrangements. Plein Air Journeys LLC reserves the right to alter the seminar itinerary or arrangements. If the scheduled Artist Teacher becomes unable to participate in the workshop, a different Artist Teacher may be substituted, but there is no guarantee. All participants are encouraged to purchase travel insurance.

**Payment Schedule:** All payment installments are due according to the payment schedule.

Please acknowledge your acceptance of the aforementioned Terms & Conditions, with your dated signature below.

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Signature	Print Name	Date
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Minor's Name	Age
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Signature of Parent of Guardian