



*Blue Sky tours*  
**HAWAII**  
**ACCEPTANCE**  
**FORM**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Booking Number \_\_\_\_\_ Departure Date \_\_\_\_\_

I have reviewed the Travel Protection Plus options available at <https://alg.www.vaxvacationaccess.com/vacation-packages/travel-protection-plus> and understand that Travel Protection Plus can only be added within 7 days of deposit or before final payment (whichever comes first).

**Travel Protection Plus:** (Must select one)

☐ I accept Travel Protection Plus. Full plan details are available at: [www.tripmate.com/wpGR430T](http://www.tripmate.com/wpGR430T)

☐ I decline Travel Protection Plus and understand that if I cancel or change for any reason including medical, I will be subject to full penalties and any refund for air-inclusive packages will be in the form of a future travel credit. In addition, I understand that I will have no coverage for trip interruption, travel delay, medical expenses, baggage and more.

**Acceptance of Terms & Conditions:**

☐ I understand the Hazardous Materials Restrictions and have read and agree to the Blue Sky Tours [Terms and Conditions](#).