

## Mutual Waiver and Indemnity Agreement

LOGOUT Srls offers its participants the opportunity to experience international travel/culinary and cultural tours. Certain potential risks to personal health and safety are associated with international travel and residence in a foreign country. You should not participate in a such a tour unless you are willing to accept the associated risks.

LOGOUT Srls cannot guarantee the health and safety of participants in a travel abroad program or eliminate all risks from travel abroad environments.

By submitting your reservation form for this program, you are agreeing to the following:

I understand that there are certain risks associated with international travel and residence in a foreign country and that LOGOUT Srls , including its director and tour leader, cannot control or eliminate these risks.

I understand that these risks may include exposure to potentially serious health and safety hazards including, but not limited to: transportation accidents, storms, floods, earthquakes, and other natural disasters, infectious diseases, inadequate medical care, remote access to medical treatment; armed insurrections; and terrorist activities.

I understand the LOGOUT Srls is not in a position to guarantee my personal health or safety during my participation in a culinary and cultural tour abroad.

I understand that LOGOUT Srls cannot monitor or control all of the daily personal decisions, choices, and activities of individual participants.

I understand the LOGOUT Srls cannot assure that U.S. standards of due process apply in overseas legal proceedings or provide or pay for legal representation for participants.

I understand that LOGOUT Srls cannot assume responsibility for the actions of persons not employed or otherwise engaged by LOGOUT Srls for events that are not part of the program, or that are beyond the control of LOGOUT Srls and its subcontractors, or for situations that may arise due to the failure of a participant to disclose pertinent information.

I understand and hereby acknowledge that I assume all risks incurred by my participation in a LOGOUT Srls international travel program.

I understand that I have the option to invite an attorney review this document and advise me of my rights.

In consideration of being allowed to enroll and participate in a LOGOUT Srls international travel program, the traveler(s) listed on the reservation form hereby release LOGOUT Srls , its director, agents, and employees from any and all claims arising out of or in any way connected with any LOGOUT Srls pro-

gram and the traveler's/travelers' participation in the program, including, but not limited to the risks as outlined above.

*Italian Sensory Experience*  
*Heart of Italy - Cuisine and Culture Tour*  
April - May, 2020 | RESERVATION FORM

To reserve a place, please return this form and a signed mutual waiver and indemnity agreement with your non-refundable deposit of \$1,000 per person by February 20, 2020 to:

Antonio Iuliano  
LOGOUT Srls  
[info@italiansensoryexperience.com](mailto:info@italiansensoryexperience.com)  
*Or call via WhatsApp (39) 3491995783 for more information*

Total final payment of \$2,995-\$1000 deposit= \$1,995 per person is due no later than March 20, 2020.

Name/s of Traveler/s as depicted in Passport(s)

\_\_\_\_\_

Date(s) of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

ACCOMMODATIONS

I wish to share a room with: \_\_\_\_\_

Double (1 shared bed)  Twin (2 beds)  Single Occupancy

PAYMENT

I have made my initial deposit to LOGOUT Srls Antonio Iuliano

I/We confirm that I/we have carefully read and agree to the Terms and Conditions and Mutual Waiver and Indemnity Agreement of this program, and agree to full payment to Antonio Iuliano, LOGOUT Srls via deposit no later than March 20, 2020. Each participant must sign below:

Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

Signature (required) \_\_\_\_\_ Date \_\_\_\_\_