



2020-2021 Reservation Form

MIR Corporation
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Please enclose a color passport copy, or scan and email a copy to MIR. Faxes are not suitable.

- Small Group Tour Rail Journey by Private Train Flexible Essential Private Trip Custom / Private Journey Special Tour

Tour Name _____ Tour Dates _____
Alternate/additional _____ Alternate/additional _____

Traveler 1 Please include a copy of your passport. Your passport must be valid for at least six months beyond the tour end date. Enter passport data as it appears in the passport.

Full Name (MUST BE LISTED EXACTLY as in passport) _____ Gender _____
Passport No. _____ Issue Date _____ Exp. Date _____ Place of Issue _____
Date of Birth _____ Place of Birth (as listed in passport) _____ Citizenship _____
Dietary restrictions _____ Smoker? Yes No Are You Retired? Yes No

Please describe your health and physical condition, including any medical conditions and medications which might affect your ability to participate in this trip.

Occupation* (or former occupation if retired) _____ Place of Work* (Co. name) _____

Description of Employer and Position* _____
**If retired, please list former occupation, last place of work and last position held.* Your status Married Unmarried Widowed

Traveler 2 Please include a copy of your passport. Your passport must be valid for at least six months beyond the tour end date. Enter passport data as it appears in the passport.

Full Name (MUST BE LISTED EXACTLY as in passport) _____ Gender _____
Passport No. _____ Issue Date _____ Exp. Date _____ Place of Issue _____
Date of Birth _____ Place of Birth (as listed in passport) _____ Citizenship _____
Dietary restrictions _____ Smoker? Yes No Are You Retired? Yes No

Please describe your health and physical condition, including any medical conditions and medications which might affect your ability to participate in this trip.

Occupation* (or former occupation if retired) _____ Place of Work* (Co. name) _____

Description of Employer and Position* _____
**If retired, please list former occupation, last place of work and last position held.* Your status Married Unmarried Widowed

Contact Information

Home Address _____ City/State/Zip _____
Tel: (Home) _____ (Cell) _____ Fax _____ Email _____
Ship Documents to (no P.O. boxes) _____ City/State/Zip _____
Emergency Contact (Name / relationship / phone number) _____

Accommodations on Group Tours Trip participants who occupy single accommodations either by choice or by circumstance must pay the single cost.

- We are traveling/rooming together. Preferred sleeping arrangements: Twin Double (subject to availability)
- I am traveling together with a companion who is billed separately. Companion name _____
- I am traveling alone and prefer a single room wherever available at the single cost.
- I am traveling alone. Please assist in finding me a roommate of the same gender if possible (I agree to pay the single cost if no roommate is available).

International Airfare International airfare is not included in the package price. MIR will provide customized air reservations from your preferred city of departure on request.

- Please send me a suggested itinerary and estimate departing from _____ Economy class Business class
Traveler 1: Frequent flyer airline and member #: _____ Seat preference: window / aisle
Traveler 2: Frequent flyer airline and member #: _____ Seat preference: window / aisle
- I will handle my own air or am using mileage tickets (Please mail MIR a copy of your itinerary showing arrival and departure flights and times by 60 days prior to departure).

Booking Terms and Conditions

For complete terms and conditions, please refer to the Booking Terms and Conditions section of the current (2020-2021) MIR Corporation catalog, pages 108-109.

Deposits and Cancellations

I/we enclose a non-refundable per person deposit in the amount of \$750 for Small Group Tours, Flexible Essential Private Trips, Custom & Private Journeys; 20% of trip cost (see tour itinerary) for Special Tours; Rail Journeys by Private Train Tours: Imperial Suite, Superior Deluxe Class, \$5,500; Gold, Kalif, Diamond, Bolshoi Platinum Classes, \$3,000; Deluxe, Silver, Sultan, Bolshoi Classes, \$2,500; all other Classes \$2,000:

\$ _____ (deposit) per person x number of travelers _____ = total enclosed \$ _____ in the form of: check Visa MC Amex

Name on Credit Card _____
Card Number _____ Exp. Date _____ Card Security # _____

Credit Card Billing Address (if different from home address above) _____

I authorize MIR Corporation to charge the total enclosed amount (your signature): _____

Payment Terms: Deposits are non-refundable and are accepted by check, money order, ACH or credit card (Visa, MasterCard or American Express). Final land payments may be made by check or credit card for reservations made directly with MIR. If booking through a travel agent, please contact your agent to find out what form of payment they accept. **(MIR can accept final payment from travel agents by agency check, wire or ACH only.)** Air fares are subject to change until ticketed; payment policies vary by carrier.

Cancellation Policy: If you cancel your trip please notify MIR in writing. Upon MIR's receipt of written notice, the following charges apply to land tours (cancellation policies vary for air tickets, custom & private group journeys). Cost of cancellation, if received:

Special Tours: 121 days or more before departure, non-refundable deposit due or paid in full of 20% of the trip cost; 91-120 days before departure, 50% of land tour cost; 90 days or less before departure, no refund.	Scheduled Rail Journeys by Private Train: 121 days or more before departure, non-refundable deposit due or paid in full \$2,000, \$2,500, \$3,000 or \$5,500; 65-120 days before departure, 50% of land tour cost; 64 days or less before departure, no refund.	Scheduled MIR Small Group Tours, Flexible Essential Private Trips, and Custom & Private Journeys for Individuals: 61 days or more before departure, non-refundable deposit due or paid in full of \$750; 31-60 days before departure, 50% of land tour cost; 30 days or less before departure, no refund.
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Please review our Booking Terms and Conditions before carefully completing this Reservation Form.
Read and sign the Release of Liability and Assumption of Risk Agreement on page 2 and mail with deposit to MIR.

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

Please read carefully: This is a legally enforceable waiver of rights

In consideration of being permitted to participate in the Tour organized, arranged and/or provided by MIR Corporation, a Washington corporation dba in the State of California as MIR Corporation Tours ("MIR," "we," or "us"), I, an adult participant and/or parent or legal guardian of a participant under the age of 18 ("minor"), acknowledge and agree to the following terms and conditions to the maximum extent allowed by law.

BOOKING TERMS AND CONDITIONS AND IMAGES RELEASE: I have carefully read and fully understand the "Booking Terms and Conditions" contained in the current (2020-2021) MIR Corporation ("MIR") catalog and this Release of Liability and Assumption of Risk Agreement ("Release"). I understand that MIR reserves the right in its sole discretion to accept, decline, or remove anyone from a Tour (at or prior to departure or during the Tour) who MIR judges to be incapable of meeting the Tour's physical and mental demands. I also acknowledge that during a MIR Tour, my image, likeness and personality may be captured on photograph, video and on other media (the "Personal Images"), and that MIR may wish to use these Personal Images for promotional and other business purposes. I consent to the taking of Personal Images of me while participating in a MIR Tour, and I grant MIR the absolute right to copyright, re-use, publish and reproduce by any medium, including electronically, any Personal Images of me or in which I may be included worldwide, free of charge and without my right of inspection. If I do not want MIR to use any Images, I understand and agree that I must inform MIR in writing before the start of the Tour.

ASSUMPTION OF ALL RISKS: I voluntarily apply to participate in a Tour under the arrangements of MIR with knowledge of the inherent hazards and risks involved in travel and activities in which I voluntarily choose to participate, including, but not limited to (all collectively referred to in this Release as "Risks"): motor vehicles, aircraft, trains, boats and all other conveyance; roads, trails and accommodations which are not maintained or operated to standards common in the United States; traveling in remote areas; the forces of nature; civil disturbance; terrorism and government restrictions, which I agree to monitor; high-altitude conditions; accident or illness in remote locations without access to rapid rescue or medical facilities; and the adequacy of medical attention once provided. I have considered my own condition and limitations and the Tour itinerary and have concluded that I am physically and emotionally fit and able to participate in this Tour. **I acknowledge that these are some, but not all, of the inherent and acquired risks associated with the activities performed on a Tour. I EXPRESSLY AGREE TO BE RESPONSIBLE FOR MY OWN WELFARE AND THE WELFARE OF MY MINOR DEPENDENTS TRAVELING WITH ME, AND I ACCEPT ANY AND ALL RISKS. I VOLUNTARILY AND KNOWINGLY FULLY ASSUME ALL OF THE ABOVE RISKS, as well as all other risks set forth in this agreement, both known and unknown, foreseeable and unforeseeable, to the fullest extent permitted by law.**

ARBITRATION: Any claim or controversy arising out of or relating to this Tour, whether or not specifically addressed in this Release, shall be exclusively and fully settled by binding single-arbitrator arbitration in Seattle, Washington, in accordance with the rules of the American Arbitration Association which are in existence at the time of the dispute. The Superior Court of Washington for King County in Seattle shall have exclusive venue and jurisdiction over all parties in enforcing the terms and requirements of this Release, including the enforcement of any arbitration award. The rights and obligations of the parties shall be fully construed under Washington State law.

RELEASE: I acknowledge having received full disclosure and the opportunity to have this Release reviewed by an attorney. Subject to such acknowledgement, and by voluntarily signing and delivering this Release, **I (including, but not limited to, my heirs, successors, assigns, beneficiaries, agents and legal representatives) FOREVER RELEASE AND DISCHARGE, HOLD HARMLESS AND COVENANT NOT TO SUE MIR, ITS OWNERS, OFFICERS, DIRECTORS, AGENTS, CONSULTANTS, EMPLOYEES, SUCCESSORS AND ASSIGNS ("Released Parties") FROM AND AGAINST any and all liability, claims, causes of action, demands, costs, damages, losses or suits of any and every kind (including, as permitted by law, claims, causes of action, demands or suits which allege MIR's negligent acts or omissions)** which I now have or may later have against Released Parties arising out of, relating to, or in connection with any MIR Tour, including, but not limited to, any claim for property loss, damage, injury or death that I might suffer. This RELEASE shall be legally interpreted to the fullest extent permissible; and, should any portion be held invalid, it is agreed that all other parts shall continue in full legal force and effect. I also acknowledge that I shall have no right to sue MIR, other than to enforce the arbitration clause, which shall control all legal claims. **I HAVE CAREFULLY READ AND FULLY UNDERSTAND AND AGREE TO THE CONTENTS AND LEGAL TERMS OF THIS RELEASE. I UNDERSTAND THAT IT IS A LEGALLY BINDING CONTRACT AND SIGN IT OF MY OWN FREE WILL. I AGREE THAT THE TERMS OF THIS AGREEMENT SHALL SERVE AS A COMPLETE RELEASE AND EXPRESS ASSUMPTION OF RISK.** I certify that I have read this agreement, fully understand its terms, understand that ***I have given up substantial rights by signing it***, and voluntarily agree to be bound by its terms.

Print Name of Traveler

Print Name of Traveler

Signature of Adult Traveler/Parent of Minor Traveler

Signature of Adult Traveler/Parent of Minor Traveler

Date

Date

Print Name of Person Signing

Print Name of Person Signing