

Travel International Group, Inc.

500 Carson Plaza Drive, Suite 212, Carson, CA 90746

Tel. 310 327-5143 * Fax 310 327-5583

E-mail: info@travelinternational.net www.travelinternational.net

CST Lic. # 2058413-40

Cancellation Request Form

PLEASE READ CAREFULLY BEFORE SIGNING THIS FORM

I, _____, authorize Travel International Group, Inc. to **CANCEL** the following itinerary:

Airline Ticket : Airline _____ . **Record Locator**: _____

Airline Tickets are **NON-REFUNDABLE**, however they are good for one year from the "Date of Purchase", subject to penalties and exchange fees. All travel date changes on an airline ticket must be made before the original departure date (subject to penalties and exchanges fees) to avoid a NO-SHOW with the airline. After the original travel date the airline ticket has no value if it was not used or cancelled on time. Once we receive this form fully completed and signed we will process the cancellation of your airline reservation.

I agree with all **Terms and Conditions** and the **Cancellation Policy** of Travel International Group Inc. has been explained by the *travel consultant* at the time of purchase. The cancellation date will be considered the date we receive this signed form.

Passenger Name (s) : _____

Original Departure Date: ____/____/____

INVOICE NUMBER AND DATE : _____

Reason For Cancellation: _____

I understand there is a penalty fee from the Tour Operator, Airline, Hotel and Travel International Group, Inc. involved in this cancellation.

X _____ / ____/____

Customer/ Cardholder Signature Today's Date

Please Fax Form to: (310) 327-5583 and mail this original form to:

Travel International Group, Inc.

500 Carson Plaza Drive, Suite : 212

Carson, CA 90746

Notice:

- 1) AIRLINES DO NOT HONOR MEDICAL CERTIFICATE FOR WAIVER OF PENALTIES.**
- 2) WE WILL NOT PROCESS ANY CANCELLATION UNTIL WE RECEIVE THIS FORM FULLY COMPLETED AND SIGNED**