



"Jesus wishes to establish in the world devotion to my Immaculate Heart"

# Pilgrimage to **ITALY**

## Thurs 3<sup>rd</sup> – Fri 11 Sept<sup>th</sup> 2009

Organised by: A DAY WITH MARY - REGISTERED CATHOLIC CHARITY (UK) No. 1071603

topp  
PROTECTED

For USA

### PILGRIMAGE OUTLINE

• **9-day (8 nights) pilgrimage** based in Rome: our residence is about 50 yards from St Peter's Square • Daily Mass and Rosary • Visit holy sites. • St Peter's Basilica complex • Guided tour to the Christian Necropolis and the burial place of St Peter remains below St Peter's basilica's grottoes • S. Mary Major Basilica • Church of Our Lady of Perpetual Succour with original Icon • Church of S. Croce (relics of the Crucifixion) • Catacombs • Other sites t.b.a. • Pilgrimage walks through old Rome visiting beautiful squares, streets, monuments and churches. • Day excursion by luxury coach (details to be announced) • Free time to explore the Vatican City and old Rome, shopping • A priest Franciscan Friar of the Immaculate (F.I.) will be our pilgrimage spiritual director • Some spiritual conferences, Daily Mass and Rosary included • *Detailed daily programme provided nearer the time.* (The Vatican Museums are within walking distance from our residence (not included as pilgrimage visit but available on a personal basis at cost for those interested).



**Please note:** flight from USA is not included in this package. You need to arrange your own flight to Lisbon, Portugal. Flight/travel advice from USA is available from Mrs Judy Cruz, contact details are at the end of this form.

**COST..... \$ 890.00 Twin rooms (T), en-suite. \$1040.00 Single room (S), en-suite**  
**DEPOSIT..... \$ 450.00 to be sent with the booking application. Confirmation will be sent by post.**  
**BALANCE..... \$ 440.00(T) / \$590(S) to be paid by Saturday 4 July 2009. Sorry, no reductions for children.**

This 9-day pilgrimage cost includes: chartered coach travel whilst in Italy; full board accommodation 6 days, half board 3 days  
**PLEASE NOTE: YOU MUST ARRANGE YOUR OWN FLIGHT USA-ROME-USA.**

### IMPORTANT TO NOTE:

- a) Accommodation for whole pilgrimage will be in twin/single rooms, subject to availability, in residence by St Peter's Square by the Vatican. All rooms are en-suite. Food will be Italian type. Special diets can be accommodated only if declared at the time of booking and confirmed by the organisers. Packed/picnic lunch occasionally, due to travel. Three (3 Nos.) days on half board.
- b) All pilgrims must arrange and carry their own full travel and medical insurance (not included in the pilgrimage cost). It is your responsibility to ensure that the insurance cover you purchase is adequate for your particular needs. You will need to let us know your insurance company or providers name, policy name and number, their address, ordinary and emergency telephone numbers: Your insurance details must reach us by not later than Saturday 4 July 2009 or your ticket may not be issued and your deposit and booking lost.
- c) To secure a place please send a deposit of \$450 with this application form filled in as soon as possible. The balance, as indicated above, must reach us at the address below by not later than **Saturday 4 July 2009**. If you should cancel on or after 4 July 2009 you will lose your deposit. It is important that you take out the necessary suitable insurance to cover any potential loss of monies paid out and which are not refundable. **Cancellations:** these must be received in writing only: if received between 6 and 20 August 2009 these will incur a cancellation charge of 80% of the pilgrimage cost; Cancellations received (in writing only) on or after 21 August will incur a 100% cancellation charge of the pilgrimage cost.
- d) *If you have not reserved a place before 4 July 2009 you can send a deposit of \$450 and ask to be placed on the waiting list should anyone drop out, or make enquiries direct with us. If no-one cancels your deposit will be returned to you after 3 September 2009. Please note: the final date for receipt of your outstanding balance and insurance details is Saturday 4 July 2009.*
- e) *Unfortunately this pilgrimage does not have provisions for disabled people and is therefore unsuitable for them. However if you consider that your condition does not prevent you from taking part, please phone Judy at number below. It is of the essence that you provide a full disclosure of your disability to enable the organisers to assess whether this pilgrimage would be suitable.*
- f) This pilgrimage is run as a spiritual pilgrimage, in the Fatima spirit, with daily Mass and the Rosary. It involves some walking and early morning rising some of the days. Those wishing to book need to be prepared for this and to follow the group. In doubt please consult the organisers before booking.
- g) *Please note that there is a fair amount of walking on some days, with steps inside and outside buildings, and that this pilgrimage is not suitable for disabled people or for those not fully mobile (we simply do not have the necessary facilities and organisation). Any personal conditions will be noted as you disclose them on your booking form. Very occasionally however, on some past pilgrimages, it was found on arrival in Fatima that a person had not disclosed a personal disability/condition that required, for example, the use of a wheelchair, or other artificial walking aid, or other limiting personal condition (i.e.: ability to walk no more than a short distance) and that specific personal assistance was required (which this pilgrimage does not and cannot provide). Such condition would make such a person unsuitable for this pilgrimage and he/she, in actual fact, should not book. Should such a rare situation occur and someone books for this pilgrimage without clearly stating personal disabilities/conditions/limitations, the pilgrimage organisers (A Day With Mary) reserve the right to restrict or deny access/coach travel to such persons to sites on our programme as they consider necessary and at the pilgrim's expense. Please also note that failure to disclose personal conditions/disabilities may invalidate your travel/medical insurance and could have serious consequences for you in case of need whilst abroad. Without wishing to make you feel at all unwelcome, we thought to point all this out to you now so that matters are clearly understood in advance in those personal cases where the above should happen to apply (very rare ones in our experience). Should you have any queries please contact the organisers before applying. Thank you for your understanding.*

- h) The cost of your Pilgrimage. The prices shown in our poster/above were calculated in January 2009 on the basis of then known costs and the exchange rate of £1 : \$1.4. We reserve the right to increase the price of your pilgrimage to compensate for any adverse change in the exchange rate and because of any increase in fares and increases in taxes and dues or the implementation of new ones. It is a condition of this pilgrimage that we will absorb the first 2% of any increase in prices and that you may withdraw from the tour if the surcharge exceeds 7% of the published tour price.
- i) *Travel between USA and Rome is your responsibility and is not included in the pilgrimage cost.*
- j) Please make your own copy of this form for your safekeeping before returning it to us.
- k) In compliance with UK Regulations an insurance policy has been arranged with Travel & General Insurance Company plc [www.travel-general.com](http://www.travel-general.com) authorised and regulated by the Financial Services Authority (UK), to protect customers' prepayments in the unlikely event of our financial failure and paid in respect of:
- the ground handling aspects of packages where the customer is responsible for arranging travel to the destination. offered in this brochure/literature/document/on this website (subject to the terms of the insurance policy), for:
  - a refund of such prepayments if customers have not yet travelled, or
  - making arrangements to enable the holiday to continue if customers have already travelled.
- Customers' prepayments are protected by a topp policy. In the unlikely event of financial failure please contact the claims helpline on 0870 0137 965. A copy of the policy is available on request.
- Please note** that the above is not a travel & medical insurance, which you are still required to have as at clause b) herein above.

**Please print clearly in BLOCK CAPITAL LETTERS**  
**Please write your name as it appears in your passport. Add information on separate sheet if needed.**

Surname:		Fr. /Bro /Sr. /Mr. /Mrs. /Miss :
First Name:	Date of Birth:	
Place of Birth:	Nationality:	
Address:		
Tel. No. Home:	E-mail address:	Tel. No. Work:
Do you require a vegetarian or other special medically prescribed diet? If so please give full details:		
Please advise if you have any disability (see Note g) above in this form):		
Do you require a Visa for Italy: <b>YES / NO</b> (delete non-applicable) ( Please note that this is your responsibility, but let us know (minimum eight weeks notice) if you require a letter for the Italian Consulate )		
Name of Next-of-kin:		Relationship:
Address of Next-of-kin:		
Tel. No. Home:	Fax. Home:	Tel. No. Work:
If you have already arranged to share with someone on this pilgrimage please enter that person's name here:		
Please tick inside one box only, to select type of room required: <span style="font-size: 2em;">→</span>		
<input type="checkbox"/>	<b>Twin room to share</b>	<input type="checkbox"/>
		<b>Single room</b>

DECLARATIONS:

1. I have read and accept all the above booking conditions, including payment, travel, medical insurance and accommodation and I am in full agreement with them.

Signed ..... Date .....

For those under any form of medical treatment/condition, etc:

2. I have my doctor's written permission to make this pilgrimage (please include a copy of the doctor's letter together with your booking form). I have disclosed to the organisers any personal condition/limitation as at paragraph g) above. There are no known reasons which are likely to lead to a cancellation, disqualification of insurance or of an insurance claim.

Signed ..... Date .....

**All cheques must be payable to: "A DAY WITH MARY PILGRIMAGE "**

*Please return this booking form together with a deposit of \$360.00 to:*

**Mrs Judith Cruz, 70 Farnum Street, East Providence, Rhodes Island 02914**

For further information ring Judy on: + 401.438.0437 (Answerphone/Fax on request)



All messages left on our answering machine will be returned. Sorry, no personal callers.