

Travel Cancellation Form

Name: _____

Email: _____

Phone: _____

Reason for Cancellation: _____

Date of Vacation: _____

Location of Vacation: _____

Check all that applies:

Single Vacation

Partial Cancellation

Group Vacation

Entire Vacation Cancellation

If partial cancellation:

How many people are still going on vacation: _____

I have informed the other travelers that I will no longer be traveling.

If entire vacation cancellation: All group members 18 and older will need to fill out a cancellation form.

Please scan and email this document to info@companyassist.org or mail it to

1375 Kemper Meadow Drive Suite 11 Cincinnati, Ohio 45240

Signature: _____ Date: _____

Disclaimer: I understand that there may be a penalty from the Tour Operator / Travel Supplier(s) involved in this cancellation. I also, understand that any refund that I may be due could take up to thirty (30) days to post to my credit / debit card. Company Assist Services & Travel charges a minimum fee of \$50.00 per person for all cancelled vacation packages and up to 10% of the total value of the package. This fee is not covered under any purchased travel insurance and is separate from charges incurred from the airline and hotel due to cancellation. Please review the terms and services as well as the refund policy for more information on your refund eligibility.