Reconnect Hungary

Terms and Conditions

PASSPORT AND VISA REQUIREMENTS: Participants are responsible for the validity of their passport, and the passport **must be valid at least six months beyond the date of entry or departure to/from the international destination.** Participants are also responsible for **having and providing proof of an ETIAS (European Travel Information and Authorization System)** which is an entry requirement for visa-exempt nationals like U.S. and Canadian citizens traveling to the Schengen Area, which includes Hungary and Romania.

TRANSPORTATION: The Reconnect Hungary Program covers travel from New York City to Budapest, from Budapest back to JFK Airport, as well as travel within Hungary and surrounding countries during the course of the trip.

ACCOMMODATIONS: The Program will cover the cost of all accommodations for the duration of the Program.

MEALS: Most meals are provided daily, except where noted in the itinerary.

TIPS AND TAXES: Tips and taxes normally appearing on hotel and restaurant bills as service are included, as are all government and local taxes.
NOT INCLUDED: Expenses and items not covered include but are not limited to transportation to and from New York City, passport and visa fees, meals not listed, and items of a personal nature, such as gifts, laundry, wines, liquors, mineral waters, after-dinner coffee or tea, snacks, sightseeing or services other than those specifically mentioned, excess baggage, and insurance.

DEPOSITS AND CANCELLATIONS: All cancellation and refund claims must be submitted in writing to the Reconnect Hungary Program. If you have to cancel after having paid, but up to 120 days before departure, we will retain a $300 administrative fee. Cancellations made within 120 days prior to departure will result in the forfeiture of the entire payment for the program. The Reconnect Hungary Program and its representatives act only as agents for the Program participants in making arrangements for hotels, transportation, sightseeing, restaurants, or any other services in connection with the itinerary. The tickets, coupons, tariffs, rules or contracts currently in use by any carrier, hotel, restaurant or other contractor rendering services shall constitute the sole contract between such contractor and the tour member. The right is reserved to cancel or change itineraries, or substitute services without notice, and to decline to accept or retain any participant at any time.

HEALTH AND MEDICAL CONSIDERATIONS: You agree that you have consulted a physician of your own choice and have been advised by said physician that you are in good health, do not suffer from any physical or mental condition, ailment or disability which requires any medical or surgical care or treatment, or which would make your travel and/or participation in the Program hazardous, unwise, unwarranted or a potential source of danger to you or to others who may travel with or participate in the Program. Furthermore, you agree to fill out the health form(s) provided by the Program to the best of your knowledge and to submit them along with other required materials.

HEALTH INSURANCE: You agree that you have personal medical insurance coverage that is effective during the entire duration of the Reconnect Hungary trip.

TRAVEL INSURANCE: You agree that you have travel insurance coverage that is effective during the entire duration of the Reconnect Hungary trip.

PERMISSION FOR TREATMENT: In case of a medical or surgical emergency, you hereby give permission to the physician selected by the Program organizer to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for you.

RULES OF CONDUCT: You may be removed from the Program at any time for, among other reasons, (a) not participating in the activities of the Program; (b) use or possession of illegal drugs; (c) being intoxicated by either alcohol, illicit or prescription drugs, or any other potentially debilitating substance; (d) threats or acts of violence or vandalism; (e) improper behavior, such as offensive language, bullying, unsolicited sexual advances, creating enmity between participants, or against the Program and its organizers; (f) failure to disclose or disclosing inaccurate medical information; (g) failure to comply with rules or regulations imposed by the Program organizers, including late arrival to assembly times on more than one occasion. You agree that you have no prior criminal record.

DATE: _____

NAME (as in passport): _____

SIGNATURE: _____