

Trip Itinerary

Wed, Sept 23rd:

7am departure from St. Bridget Loves Park parking lot. En route stop in Peoria for visit to the tomb of Fulton Sheen. Guided tour of the basilica followed by group lunch. Afternoon arrival in St. Louis. Group Mass and tour at the Shrine of St. Joseph. Check in at the hotel. Dinner on your own. Overnight at Radisson Downtown St. Louis.

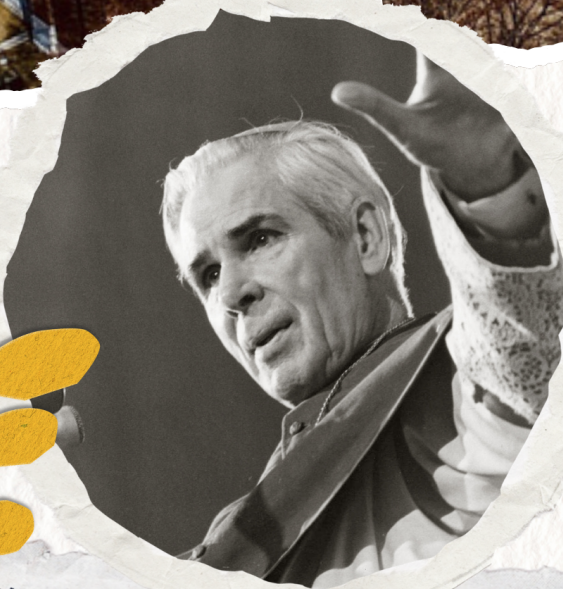
Thursday, Sept 24th: Beatification Day!

After breakfast, walk across the street to the Dome Convention Center. Check out the expo of Catholic organizations and businesses a-plenty! Partake in Adoration and/or confession before the pre-Mass show begins at 10am. Lunch on your own. Beatification Mass begins at 2pm! After Mass there will be an opportunity to venerate a relic of Blessed Fulton Sheen! Group dinner at a local restaurant.

Friday, Sept 25th:

Breakfast at hotel. 9am Group Mass followed by guided tour at the Cathedral of St. Louis where you can admire the world's largest collection of mosaic art in the Western Hemisphere! Departure from St. Louis. Lunch stop along the route home. Late afternoon arrival back at St Bridget's.

**More Info &
Registration
Forms Here:**



Joint Bookrunner and Joint Bookrunner

Registration Form

Full payment is due at the time of registration. Add \$_____ (see insurance form for pricing) if signing up for optional travel insurance. *Cash, Check, Electronic Transfer or Credit Cards accepted. (If credit card is elected, a 3.5% fee will be added to the transaction amount.)*

Checks payable to:



For His Glory Tours
17601 Granite Drive
Marengo, IL 60152
847) 912 - 6019

Tour Leader: Katie Jo Baynai
Chaplain: Fr. Jeffrey Filipski
Name of Trip: Fulton Sheen Beatification
Date of Trip: Sept 23 - 25, 2026

Participant Information:

Name: _____ Date of Birth: _____ / _____ / _____
Month Day Year

Sex: M _____ F _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (_____) _____ Email: _____

Room Assignment Preferences:

Name(s) of other persons I am traveling with: _____

☐ I will share a room. (3rd & 4th guest in a shared room receive a \$200 discount per person.)

☐ I desire single room accommodations (subject to availability) at the additional charge of \$200.

Travel Insurance: (recommended)

___ YES, please purchase on my behalf. (Include insurance payment with deposit.)

___ YES, I will purchase on my own and provide verification. (No insurance payment submitted.)

___ NO, my signature is below.

I hereby **decline** travel insurance and I understand that I am assuming any financial loss associated with my travel arrangements which otherwise may have been covered by travel insurance. Signature required. (*If under 18, parent/guardian signature required.)

Participant's Name (Please Print)

Participant's Signature

Date

Parent/Guardian Name (Please Print)

Parent/Guardian's Signature

Date

Payment Method:

☐ Cash/Check. Enclosed and made payable to: For His Glory Tours

☐ Zelle (ForHisGloryTours@gmail.com or 847-912-6019)

☐ Venmo (@Katie-Baynai)

☐ Credit Card: A 3.5% fee will be added to the transaction. Payments processed through Square invoice.

☐ Option 1: \$750

☐ Option 2: \$750 + Travel Insurance Amount

Medical and Insurance Information

Emergency Contact: (not traveling with you)

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Work Phone: (_____) _____ Email: _____

Medical Information:

Medical conditions & history to be aware of: _____

List any known allergies: _____

I am on the following medications: _____

Insurance Information: *Please attach a copy of your insurance card to this form.*

Insurance Company or Group: _____

Policy #: _____ Name of Insured: _____



For His Glory Tours
17601 Granite Drive
Marengo, IL 60172

General Terms And Conditions

1. **PAYMENT INFORMATION:** Payments should be made payable to For His Glory Tours, LLC., 17601 Granite Drive Marengo, IL 60152. Full payment of \$750.00 is required at the time of registration to secure a reservation. The additional travel insurance at a cost of _____ (see insurance form for pricing) is highly recommended by For His Glory Tours. If you wish to decline this insurance, you must acknowledge your understanding & decision by signing the release on the Registration Form. If electing to pay by credit card, a processing fee of 3.5% will be added to the total transaction amount. FULL payment is due no later than 45 days (August 9th, 2026) prior to departure. Late payments can be assessed a \$100 late fee. Reservations may be cancelled and we reserve the right to levy full cancellation charges as set forth in these conditions if full payment is not received 45 days prior to the departure date of the tour. In the event of a billing error, we reserve the right to reinvoice with correct pricing. Final trip information will be issued after final payment has been processed, and normally will be 1-2 weeks prior to departure.
2. **GENERAL:** Payment, including appropriate travel insurance premium (when selected), is necessary to secure reservation. For late bookings (within 45 days of departure), full payment is due immediately by credit card, electronic transfer, bank check or money order. No reservations will be accepted 14 days or less before departure. All payments, except late bookings, can be made by personal check, cash, bank check, money order, electronic transfer (Zelle or Venmo) or credit card.
3. **CANCELLATION INFORMATION:** All cancellations must be made in writing in order to withdraw from the tour. Cancellations are effective from the date of receipt. No refunds are issued for cancellations received after the departure date of the tour. Penalties will apply. If you cancel your tour, because it is necessary to pay deposits, rebook transportation & lodging arrangements, etc., cancellation fees and penalties will be deducted from your refund. Cancellation fees do not apply to non-refundable deposit payments. Cancellation fees apply to each person. Penalty amounts are as follows:

45 days or more	10% of tour cost
21-44 days	50% of tour cost
10-20 days	75% of tour cost
Less than 10 days	100% of tour cost. (No refund)
4. **ROOMS:** Prices are based on multi-person occupancy. Single rooms are available at a supplementary cost as stated on registration form. Single rooms are available on a limited basis and are not guaranteed. A discount of \$200 are offered for 3rd & 4th guest in shared room.
5. **TAXES:** All taxes have been included in the itinerary price. However, in the event of an increase in the price of fuel or local taxes, a surcharge will be added to the price of the tour.
6. **TIPPING:** The price of the tour does include tips and gratuities for hired tour guides, bus drivers & restaurants. You are welcome to leave an additional tip if you choose. The tour price does not include a tip for the chaplain or tour organizer.
7. **SITSEEING & ITINERARIES:** Sightseeing is included as per the itinerary. During holidays some sights such as museums, monuments, churches, etc., may be closed or unavailable for visits. For His Glory Tours reserves the right to vary the sequence of the sightseeing, reroute the order or substitute events should circumstances demand it. Please understand that not all attractions are open every day of the year, and inclement weather can also affect scheduled sites/events.
8. **MEDICAL CONDITION:** For His Glory Tours is not responsible for any medical condition that occurs prior, during or after the tour.
9. **TRAVEL INSURANCE:** The easy, affordable way to protect your pilgrimage investment is with a supplemental travel insurance plan. It gives you peace of mind while traveling. The travel protection plan offered is administered by Travel Guard and is available with all travel arrangements. This travel protection plan covers your vacation investment, your belongings and most importantly, you. More details about insurance coverage are available on the Travel Insurance Info Form.

I understand and accept all terms and conditions presented to me in the General Terms & Conditions form.

Signature required. (If under 18, parent/guardian signature required.)

Participant's Name (Please Print)

Participant's Signature

Date

Parent/Guardian Name (Please Print)

Parent/Guardian's Signature

Date



For His Glory Tours
17601 Granite Drive
Marengo, IL 60152

Group Travel Waiver of Liability and Hold Harmless Agreement

1. In consideration for receiving permission of For His Glory Tours, to participate in the Sept 23 - 25, 2026 pilgrimage to the Beatification of Fulton Sheen, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE For His Glory Tours, LLC., the Parish Church, the Diocese of Rockford, IL or their employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such activity, or where the activity is being conducted.
2. I am fully aware of the risks involved and hazards connected to this activity, including but not limited to travel risks. I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such an activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.
3. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise.
4. It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES.
5. IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Personal Health Disclaimer:

6. ***I certify that I am in good physical health and am physically able to participate in the described activities of this tour.*** I understand and acknowledge that serious accidents sometimes occur during activities such as this, and that some medical conditions may be exacerbated or aggravated, and that participants occasionally sustain mortal or serious personal injuries and/or property damage as a consequence thereof, and that my participation could result in loss of or damage to my property, serious injury to my body or to others, and/or my death.

Insurance Disclaimer:

7. I have been advised to obtain personal medical & travel insurance coverage. Furthermore, I agree to use my personal insurance as a primary medical coverage if an accident or injury occurs.

Required Signatures

I have read this Release, and understand the terms used in it and their legal significance. This Release is freely and voluntarily given with the understanding that rights to legal recourse against For His Glory Tours, LLC., my parish church, the Diocese of Rockford, IL and all other auxiliary organizations of For His Glory Tours are knowingly given up in return for allowing my participation in the travel activity described above.

Participant's Name (Please Print)

Participant's Signature

Date

If participant is under the age of 18, Parent/Guardian consents to the minor's participation in the event, consents for For His Glory Tours, LLC. to seek reasonable and necessary medical treatment for Participant during such event or associated activities, and agrees to be responsible for any cost of such treatment.

Parent/Guardian Name (Please Print)

Parent/Guardian's Signature

Date



For His Glory Tours
17601 Granite Drive
Marengo, IL 60152

Travel Insurance Information

Why Buy a Travel Insurance plan?

No matter how hard you try, there are some things you just can't plan for...

If a family member gets sick.

Your wallet is lost or stolen.

If weather prevents your travel.

You need to see a doctor for a sudden injury.

You can customize your travel insurance policy by purchasing it yourself.

Recommended site for comparing plans and purchasing your own: <https://www.travelguard.com>

OR... We can do the work for you and purchase a travel insurance plan on your behalf. Insurance Provided By: Travel Guard

Travel Guard is the largest travel insurance provider in the United States, protecting travelers for more than 25 years and more than 6 million people every year. It provides some of the broadest coverage in the travel insurance industry. They review claims within 24-hours of receipt and provide 24/7 customer service.

General Information about Insurance Package:

To receive full benefit, travel Insurance must be purchased within 15 days of trip deposit!

There are multiple options for coverage (e.g. Essential, Preferred, Deluxe, Custom Plans, etc.). For His Glory Tours recommends the Preferred Plan. It is the most popular package of travel insurance & assistance services offered by Travel Guard. Offering comprehensive coverage for individual travelers and families, this plan includes children 17 and under covered at no additional cost. If you purchase within 15 days of initial trip deposit, this plan provides additional coverage for Pre-Existing Medical Conditions Exclusion Waiver otherwise excluded due to pre-existing medical conditions. Optional coverage add-ons include 'Cancel for Any Reason' and 'Medical Evacuation' home or to the hospital of choice.

Insurance Pricing*: Below are the "Preferred Plan" prices based on Illinois residency, \$750 tour price & the year you were born. If you were born in a different year, you are occupying a single room or you are the 3rd or 4th guest in a shared room, your exact price will differ. You can contact For His Glory Tours to receive an exact price based on your birth date.

Year of Birth:	Price:	Year of Birth:	Price:
2005	\$50.20	1970	\$56.48
2000	\$52.41	1965	\$58.80
1995	\$54.03	1960	\$62.82
1990	\$54.61	1955	\$71.91
1985	\$54.67	1950	\$92.92
1980	\$54.75	1945	\$128.05
1975	\$55.26	1940	\$190.25

Family Coverage:

At no additional charge, the plan covers all children age 17 and under who are traveling with and related to the primary adult named on the policy form.

**There are other Travel Guard plans available (Essential, Deluxe, etc). You can also choose to customize your own travel insurance plan on [travelguard.com](https://www.travelguard.com). For His Glory Tours, LLC. recommends the Preferred plan. Additional information for this plan will be provided in separate document.*