

# PAISLEY DIOCESE PILGRIMAGE TO LOURDES 2020



Led by the Bishop John Keenan, Bishop of Paisley. Pilgrimage Director: Fr Gerard McNellis

**26 JUNE - 2 JULY 2020 | 6 NIGHTS | BY AIR FROM GLASGOW INTERNATIONAL AIRPORT**

## ONLINE PRICE

ST LOUIS DE FRANCE

£689

HOTEL AGENA

£749

HOTEL PADOUE

£765

## SELLING PRICE

£699

£759

£775

### COST INCLUDES:

- Direct flight from Glasgow International Airport to Lourdes and return
- Transfer on arrival at Lourdes Airport to your hotel and return
- 6 nights accommodation at selected hotel
- Breakfast, lunch and dinner served each day
- Airport taxes & charges, UK government levy and Lourdes city tax
- Full religious programme facilitated by Joe Walsh Tours in conjunction with the Diocese of Paisley
- One standard piece of check-in luggage subject to airline's conditions

Book online [www.joewalstours.co.uk](http://www.joewalstours.co.uk) & you can avail of a **£10 Discount** (not applicable to group bookings)

*By booking online and receiving the £10 discount per person you agree to receive all booking documentation in electronic form, including but not limited to invoices and airline tickets. Documents by post incur an additional fee to be charged at the time of request.*

### BOOKING PROCEDURE:

All bookings on the Pilgrimage should be made through Joe Walsh Tours, **143 Lower Baggot Street, Dublin 2, Ireland.**  
**Tel: 0141 5305060, [www.joewalstours.co.uk](http://www.joewalstours.co.uk).** No booking is definite until we have received a completed booking form, a non-refundable deposit and until this deposit is receipted by our office. **Please note that vouchers are only accepted against the final balance.** Please use international mail service for all correspondence.

### VERY IMPORTANT:

**PILGRIMS WITH A MEDICAL CONDITION WHO WISH TO TRAVEL AS A REGISTERED SICK PILGRIM SHOULD OBTAIN AN APPLICATION FORM FROM:** Anne Louise Buchanan, Email: [albuchanan@talktalk.net](mailto:albuchanan@talktalk.net) Tel: 01475 638132

*The closing date for receipt of applications is: **31<sup>st</sup> March 2020.** Guidance on how to complete it is contained within the form. Acceptance as a registered sick pilgrim is subject to the approval of the Pilgrimage Medical Committee. Accueil sick are accommodated at the Hotel Padoue in Lourdes.*

**PLEASE NOTE:** Assistance on the journey and in Lourdes can only be offered to **registered sick pilgrims** staying at the Hotel Padoue. Limited assistance **may** be offered to a small number of registered sick pilgrims staying in hotels, **but this is not guaranteed.** Support will be allocated, where possible. Help cannot be given on request when in Lourdes on an ad hoc basis, as resources may not permit. Applicants who require support **MUST** make themselves known to the Hospitalite in advance of booking, by submitting an **application to Anne Louise Buchanan** before **31<sup>st</sup> March 2020.**

**BOOKINGS TO: Joe Walsh Tours | 143 Lower Baggot Street, Dublin 2, Ireland | [www.joewalstours.co.uk](http://www.joewalstours.co.uk)  
0141 5305060 | [info@joewalstours.co.uk](mailto:info@joewalstours.co.uk) | Deposit £200 | Limited places available.**



**PLEASE READ THE TERMS AND CONDITIONS CAREFULLY BEFORE FILLING OUT THE BOOKING FORM.**

**TRAVEL INSURANCE:**

Travel insurance is charged at £29 for persons up to 85 years old. Please note that an additional insurance premium of £29 is charged for persons aged 86-94 years and that persons 95 years and over should contact this office to have their insurance policy confirmed. Should you wish to contract our travel insurance, please tick the appropriate box on the booking form. A copy of the insurance policy will be forwarded to you with confirmation of your booking and we would ask you to read this carefully to be aware of your exact cover. **If you are taking prescribed medication of any kind or you have a diagnosed medical condition of any kind your GP must certify you fit to travel under the terms of the travel insurance. A medical declaration form will be forwarded to you with your confirmation invoice.**

**HOTELS:**

We have made arrangements to reserve the best accommodation available in a good range of hotels, well known for their kind attention and good service. Please note the cost is based on sharing a twin, treble or 4-bed room with private facilities. We will make every effort to provide the hotel requested. However, all hotels are subject to availability at time of booking

**SINGLE ROOMS:**

These are very limited and subject to availability at a supplementary charge of £31 per night for hotels Agena and Louis de France, and £36 per night for hotels Padoue. Your kind cooperation in agreeing to share a twin, treble or 4-bed room, if at all possible, will be much appreciated.

**MEDICAL & OTHER MISCELLANEOUS CHARGES:**

Please note these charges in total are the direct responsibility of the pilgrim or their legal guardian/next of kin. All travellers must have a **European Health Insurance** card (EHIC), formerly **E111**. This card can be applied for or renewed online at [www.ehic.org.uk](http://www.ehic.org.uk). **Please read your insurance cover carefully – it is vitally important to complete a Medical Declaration Form if you have a medical condition which has required medical advice, treatment, medication or hospitalisation during the last 18 months.**

**NOTICE TO PASSENGERS:**

The flying time to Lourdes is approximately 2 hours 20 minutes. A buy-on-board catering system is available on flights to and from Lourdes.

**PASSPORT:**

**EVERY PERSON TRAVELLING TO FRANCE MUST HAVE A VALID UP-TO-DATE PASSPORT.** If you already have a passport, please check now that it will be valid for travel three months beyond 3<sup>rd</sup> July 2020.

**BALANCE OF FARE:**

Balance of fare is due TWELVE WEEKS before departure date. Joe Walsh Tours shall be entitled at their discretion to treat as cancelled any booking in respect of which the balance of fare shall not have been remitted twelve weeks before the date of departure.

**FINAL INSTRUCTIONS:**

Full information and air tickets, luggage labels will be sent to you within 10 days prior to the departure date of the Pilgrimage. Final flight timings will be confirmed at this point.

**WHEELCHAIRS:**

Wheelchairs are not covered under standard travel insurance. We recommend separate cover. Joe Walsh Tours must be advised if you intend taking a motorised wheelchair or motorised scooter to Lourdes. Acceptance will be subject to any weight restrictions imposed by the airline. Full details of weight and dimensions must be registered at time of booking.

**USE OF YOUR INFORMATION:**

Information provided on this form will be held and exchanged between Joe Walsh Tours, the diocese and it's associated organisations. It may be shared with third parties associated with Lourdes. Information provided may also be used to contact you, for example by email, text or phone call to update you with details concerning the pilgrimage.

**GDPR:**

As per European GDPR regulation, by signing this form you are providing Joe Walsh Pilgrimage Tours Ltd consent to process your personal information. A full copy of our Privacy Policy is available on request.

**YOUR FINANCIAL PROTECTION:**

Customers' prepayments are protected by the topp policy, subject to the terms and conditions of the policy. In the unlikely event of financial failure please contact the claims helpline on +44(0)1702 811397. A copy of the policy is available on request from your travel organiser. This policy is provided by Travel & General Insurance Services Limited (t&g), registered number 02527363 and underwritten by Hiscox Insurance Company Limited (Hiscox), registered number 00070234. t&g and Hiscox are authorised and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (number 113849). More information regarding this policy is available to read on our website: [www.joewalshstours.co.uk](http://www.joewalshstours.co.uk)

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## 26 JUNE - 2 JULY 2020 | 6 NIGHTS

Ref

Office Use Only

### Section 1: Passenger Names as per Passport

Please provide your full name as it appears on your passport

Surname	First Name	Title	Valid EHIC Number (in date)	Date of Birth

### Section 2: Contact Details

Address of 1st Named Person only (BLOCK CAPITALS):

Telephone Number: \_\_\_\_\_ Mobile Phone Number: \_\_\_\_\_

Parish: \_\_\_\_\_

Email:

Name of emergency contact while abroad: \_\_\_\_\_

Telephone Number of emergency contact while abroad: \_\_\_\_\_

### Section 3: Hotel Details

Hotels Available: Please indicate the hotel of your choice (hotels are subject to availability at time of booking)

Agena <input type="checkbox"/>	Padoue <input type="checkbox"/>	St. Louis de France <input type="checkbox"/>	
Single Room* <input type="checkbox"/>	Twin Room <input type="checkbox"/>	Treble Room (3 single beds) <input type="checkbox"/>	4-bed Room <input type="checkbox"/>

Willing to share (i.e. share with another person)  Name (if known): \_\_\_\_\_

\*Single Room subject to availability, supplement applies, please see page 2 for details.

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0141 5305060 | [info@joewalstours.co.uk](mailto:info@joewalstours.co.uk) | Deposit £200 | Limited places available.



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## Section 4: Insurance Details

I require travel insurance <input type="checkbox"/>		I DO NOT require travel insurance <input type="checkbox"/>	
Premium:	£29 (up to 85 yrs) <input type="checkbox"/>	£58 (85 yrs +) <input type="checkbox"/>	
Persons aged 95 or over should apply to Joe Walsh Tours for confirmation and details of cover. If insurance is not required, please provide details of your own travel insurance below:			
Name:	Insurer:	Policy No:	Emergency Tel:
Please indicate if you are: <b>A) Registered Supported Pilgrim</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>B) Companion to Registered Supported Pilgrim</b> Yes <input type="checkbox"/> No <input type="checkbox"/>			
If <b>Yes</b> , please provide the name of Registered Supported Pilgrim:			

## Section 5: Medical Details

Please complete the questionnaire below. If you are currently on medication of any kind, it is your responsibility to ensure you have an adequate supply with you for the duration of your pilgrimage.

	1 <sup>st</sup> Named	2 <sup>nd</sup> Named	3 <sup>rd</sup> Named	4 <sup>th</sup> Named
Any visual impairment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Any hearing impairment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Can you board a coach unaided?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require a walk-in shower?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require assistance boarding via the steps of the aircraft?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you use a wheelchair?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If <b>YES</b> , will you bring your own?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you require the use of a wheelchair in Lourdes? <i>This must be booked in advance.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If you are wheelchair bound and staying in hotel accommodation, please tick here must also tick here: <input type="checkbox"/> You must advise us in writing, by sending a letter to: Joe Walsh Tours, 143 Lower Baggot St, Dublin 2, Ireland, D02 PH39 <i>Please note: Wheelchairs are not covered under your travel insurance. Separate cover is recommended.</i>				

<b>Where did you hear about the pilgrimage?</b>			
Travelled in the past <input type="checkbox"/>	Friends/Family <input type="checkbox"/>	Parish Priest <input type="checkbox"/>	Parish Newsletter <input type="checkbox"/>
Mass Announcement/Leaflet <input type="checkbox"/>	Poster/Flyer <input type="checkbox"/>	Newspaper <input type="checkbox"/>	Internet <input type="checkbox"/>
Other (please specify):			
Please specify any special diet required:			

**IT IS VITALLY IMPORTANT TO COMPLETE A MEDICAL DECLARATION FORM IF YOU HAVE A MEDICAL CONDITION WHICH HAS REQUIRED MEDICAL ADVICE, TREATMENT, MEDICATION OR HOSPITALISATION DURING THE LAST EIGHTEEN MONTHS. THE FORM CAN BE OBTAINED FROM JOE WALSH TOURS.**

Please turn page to view reverse ▶▶▶

**BOOKINGS TO: Joe Walsh Tours | 143 Lower Baggot Street, Dublin 2, Ireland | www.joewalshstours.co.uk**  
 0141 5305060 | info@joewalshstours.co.uk | Deposit £200 | Limited places available.



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## Section 6: Payment Details

### PAYMENT DEPOSIT:

I enclose £200 being deposit(s) for  (insert number) person(s).

Please note: The required minimum deposit of £200 per person is **NON-REFUNDABLE** on cancellation of booking

**CHEQUE:** All cheques should be made payable to **Joe Walsh Tours**.

### CREDIT CARD/DEBIT CARD:

I wish to pay by credit card/debit card. Please debit my credit/debit card for the amount of £ \_\_\_\_\_ being deposit(s) and travel insurance premium(s) for  person(s) (insert number of people).

**Should you prefer to make a credit/debit card payment over the phone, please contact our office on 0161 820 8790**

Card Type:

Card Holder's Name:

Card No:

Card Expiry Date:

3 digit security code (from back of card):

**Please note: vouchers are only accepted against the final balance.**

**INFORMATION PROVIDED ON THIS FORM WILL BE HELD AND EXCHANGED BETWEEN JOE WALSH TOURS, THE PAISLEY DIOCESAN PILGRIMAGE TO LOURDES AND ITS ASSOCIATED ORGANISATIONS, AND MAY BE SHARED WITH THIRD PARTIES ASSOCIATED WITH LOURDES. INFORMATION PROVIDED MAY ALSO BE USED TO CONTACT YOU, E.G., BY TEXT/EMAIL, DETAILS/UPDATES CONCERNING THE PILGRIMAGE.**

The Pilgrimage provides support and medical assistance only to officially registered Supported Pilgrims. It is vitally important to advise us at the time of booking if you have an active medical condition and are likely to require the use of a wheelchair and assistance either at the airport or whilst in Lourdes. I accept the booking conditions of Joe Walsh Tours which can be found on [www.joewalsh tours.co.uk](http://www.joewalsh tours.co.uk)

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Passport details required for each passenger on this booking form >>>**

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0141 5305060 | [info@joewalsh tours.co.uk](mailto:info@joewalsh tours.co.uk) | Deposit £200 | Limited places available.**



## Section 7: Passport Details Required by Airline

Please provide details as they appear on your passport

### PASSENGER 1

First Name:		Surname:	
Document Type (e.g passport etc):		Document Number:	
Document Expiry Date (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Country of Issue:		Nationality:	
Date of Birth (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Gender: M <input type="checkbox"/> F <input type="checkbox"/>	

### PASSENGER 2

First Name:		Surname:	
Document Type (e.g passport etc):		Document Number:	
Document Expiry Date (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Country of Issue:		Nationality:	
Date of Birth (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Gender: M <input type="checkbox"/> F <input type="checkbox"/>	

### PASSENGER 3

First Name:		Surname:	
Document Type (e.g passport etc):		Document Number:	
Document Expiry Date (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Country of Issue:		Nationality:	
Date of Birth (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Gender: M <input type="checkbox"/> F <input type="checkbox"/>	

### PASSENGER 4

First Name:		Surname:	
Document Type (e.g passport etc):		Document Number:	
Document Expiry Date (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Country of Issue:		Nationality:	
Date of Birth (dd/mm/yyyy): <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Gender: M <input type="checkbox"/> F <input type="checkbox"/>	

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