



PLEASE READ CAREFULLY:

Prior to completing the form below please contact us by phone or email to register your interest. We will then hold our places for your party for up to 5 working days whilst we await receipt of your completed form.

1. Please read our booking terms & conditions and our client code before completing this form in **BLOCK CAPITALS**.
2. Unless otherwise stated in the tour brochure, your final payment is due no later than 60 days prior to departure.
3. Insurance is compulsory for all our tours. If you are unsure of the suitability of your existing policy, or would like advice on acquiring suitable cover, please contact us.
4. This form should be **SIGNED** and returned to us with your deposit, or with full payment if travelling within 12 weeks.

Details of Your Travelling Party - *please continue on a separate sheet if necessary.*

Title	First & middle name(s) (as shown on passport)	Surname (as shown on passport)	Occupation	Date of birth dd/mm/yy	Room share preference
e.g. MR	JOHN WILLIAM	SMITH	TEACHER	17/07/75	DOUBLE SHARING
1					
2					
3					
4					
5					
6					
If any traveller has a medical condition, allergies or dietary requirement please enter their name & specify. Continue on a separate sheet if necessary.					

Passport Details – *please ensure that names correspond to the numbered individuals above.*

Nationality	Passport valid for min of 6 months from date of return?	Passport to be renewed (details to follow)	Passport no.	Place of birth	Authority / Place of issue	Date of issue dd/mm/yy	Date of expiry dd/mm/yy
e.g. BRITISH	NO	YES					
e.g. BRITISH	YES	N/A	223456789	LONDON	IPS LONDON	24/03/10	23/03/20
1							
2							
3							
4							
5							
6							

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Tour & Payment Details – please complete in full.

Tour name						
Tour start date	Deposit per person	£	Total tour cost per person	£	Single supp per person	£
TODAY I WISH TO PAY: Our party's deposit of			OR: a part or final payment of			
	in cash ()					
	by cheque ()					
	by bank transfer ()					
by credit card (2.5% fee on any transaction)	Name on card					
	Card number					
	Valid from		Expires	Issue no.	3 digit security code	
by debit card (no fee)	Name on card					
	Card number					
	Valid from		Expires	Issue no.	3 digit security code	

Insurance & Emergency Contact Details – if you don't have insurance yet, please enter 'details to follow'.

Traveller no. (as per page 1)	Insurers' name	Policy number	1st Emergency contact name	1st Emergency tel no.	2nd Emergency contact name	2nd Emergency tel no.
Traveller 1						
Traveller 2						
Traveller 3						
Traveller 4						
Traveller 5						
Traveller 6						

Lead Traveller - details of the person signing this form, to whom all future correspondence will be addressed.

By signing this form I confirm that I am the lead name of the party travelling above, that I accept the prices quoted and am authorised to accept these and the booking conditions on behalf of all other persons included in this booking whether named or not. I can confirm that all details entered in this booking are correct. I further understand that I have sole responsibility for ensuring that our passports are valid for at least 6 months beyond the date of return and for obtaining all necessary visas.

Full name		Day time tel	
Address		Evening tel	
		Mobile tel	
Post Code		Email	
Signature		Date	