BOOKING FORM - GREAT EXPEDITIONS

PERSONAL INFO: Be sure names Mr/Mrs/Ms Surname			spelling as deta	tiled on passpor Height	
1. 2. 3. 4.					
Address: P	hone: (Home)	Phone: (Work)	Phone (Cell)	Fax:	Email:
Do you have any medical conditions	s?	No Yes	If yes, please g	ive details:	
Do you have any special dietary res	trictions?	No Yes	If yes, please g	ive details:	
Other Requests?					
Seat Preference?		Frequent	Flier Number(s)?	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Where did you hear about us? Trav Which One?			sement?Web	Site?Show	v / Presentation?
Upon approval of itinerary, a guar confirmed without this guarantee. A change fee, plus any penalties as been confirmed will incur a minimum confirmation, a minimum 25% depot of your trip departure, full payment reservations made within 2 weeks compensate you in part or in full for	any voluntary consessed by the mean 20% fee, plu isit will be required. One of travel date	hanges after rese suppliers of your s any penalties a ired and is NON- nce reservations tes, additional la	ervations have be travel arrangen ssessed by the REFUNDABLE. are paid in full, te booking fees	een confirmed winents. Cancellation suppliers of your lif reservations an entire package is may apply. Tra	Il incur a minimum of a \$50 ons after reservations have travel arrangements. Upon re confirmed within 60 days s NON-REFUNDABLE. For avel Insurance, which may
TRIP INSURANCE – ACCESS AMI I acceptdeclinet request. If accepted, which program?	ravel insurance	e option as deta			coverage is available upon
RESPONSIBILITY: Great Expeditions (hereinafter refer accommodations offered on the clie supplied due to causes beyond the and there are no other implied or exis limited to amounts paid to the Agt to or loss of property, or any injury of floods, fires, tropical storms, or other agents, employees and the client he suppliers. Any direct contract betwee client.	nt's invoice / iti control of the A press duties of ency under this or death of any er acts of God, ereby waives a	inerary except to Agency. This duty utside of said con agreement. The client during the delays, substitution y claim arising the	the extent such sarises out of contract. Any recover client waives and client's tour. The on of equipment one from. The right	services and according the services and according to the client for y claim against T Agency shall not or any act of omight of the client is	ommodations cannot be e client and The Agency r breach of this agreement he Agency for any damage to be responsible for any ssion by any supplier, its reserved to claims against
Proper proof of citizenship, which outside the US. It is your respons					will be required for travel
By signing below, I agree to the terr	ns detailed abo	ove:			
Signature:			Date:		