



EXTERNAL TRIP BOOKING FORM
(Please note one form per person booking)

TRIP NAME: _____ DATE: _____

(Please write in above the name and date of the trip you are booking and then complete the below clearly in block capitals)

FULL NAME (as in Passport) : _____ MAIDEN NAME: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____ NATIONALITY: _____

TELEPHONE NO: _____ MOBILE (on this trip): _____ EMAIL: _____

EMERGENCY CONTACT NAME: _____ PHONE: _____

INSURANCE COMPANY NAME & POLICY NUMBER: _____

HOTEL (tick as required): DOUBLE ROOM [] TWIN ROOM [] SINGLE ROOM []

PLEASE READ AND SIGN THE FOLLOWING:

I hereby acknowledge and agree that neither DFAS de la Frontera nor the tour organisers are in any way responsible or liable for any unforeseen problems of whatever nature during this tour. I am participating in this trip fully aware of these conditions. I understand that if I have to cancel the trip the organisers may not be able to refund the total price, as they may have to cover the expenses already incurred.

I am therefore in possession of adequate travel insurance which will cover me for all eventualities such as illness, cancellation, lost luggage and delays.

SIGNED: _____ DATE: _____

PRINT NAME: _____

Receipt for: TRIP _____ **on** _____

DEPOSIT ON REGISTRATION: _____ **DATE:** _____

FINAL PAYMENT: _____ **DATE:** _____

RECEIPT ACKNOWLEDGED: _____