



**BOOKING FORM: CORSICA SARDINIA & SICILY**

**TOUR DATES: 1<sup>st</sup> – 28<sup>th</sup> SEPTEMBER 2018**

PLEASE COMPLETE A SEPARATE FORM FOR EACH PERSON TRAVELLING (Please print clearly)

TITLE: MR/ MRS/ MS/ MISS: \_\_\_\_\_ SURNAME: : \_\_\_\_\_

COMPLETE NAME AS PER YOUR PASSPORT: \_\_\_\_\_

PREFERRED NAME: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

PH: HOME: \_\_\_\_\_ MOBILE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

PASSPORT NO: \_\_\_\_\_ PLACE OF ISSUE: \_\_\_\_\_

DATE OF ISSUE: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

SINGLE ROOM:  TWIN SHARE ROOM (2 beds):  DOUBLE ROOM:  SMOKING ROOM

I WOULD LIKE TO SHARE TWIN / DOUBLE ROOM WITH: \_\_\_\_\_

ANY SPECIAL EVENTS? (anniversaries etc) \_\_\_\_\_ DATE: \_\_\_\_\_

SPECIAL DIETARY REQUIREMENTS/ALLERGIES: \_\_\_\_\_

ANY PRE-EXISTING MEDICAL CONDITIONS? YES / NO If yes, please contact our office for further information.

FREQUENT FLYER DETAILS: AIRLINE: \_\_\_\_\_ NO: \_\_\_\_\_

SEAT REQUEST FOR FLIGHTS: AISLE  WINDOW  (seating is a request only and not guaranteed)

FLIGHT UPGRADES REQUIRED:  BUSINESS CLASS (POA)  PREMIUM ECONOMY (POA)

TRAVEL INSURANCE DETAILS (if known) INSURER: \_\_\_\_\_

POLICY NO: \_\_\_\_\_ INSURANCE EMERGENCY NO: \_\_\_\_\_

**IN CASE OF EMERGENCY PLEASE CONTACT:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTCODE: \_\_\_\_\_

PH: HOME: \_\_\_\_\_ MOBILE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**SIGNATURE REQUIRED NEXT PAGE**

## PAYMENT METHODS

Should you like to pay by **CHEQUE**, please make it out to GIPPSLAND TRAVEL CENTRE.

### **CREDIT CARDS**

A surcharge for credit cards and debit cards will apply. Fee advised on application.

TYPE OF CARD: ie. Visa/Mastercard/Amex/Diners..... Debit/Credit:.....

CREDIT CARD DETAILS: NAME ON CARD: .....

CARD NUMBER ..... EXPIRY DATE: .....

CARDHOLDER SIGNATURE: ..... CCV: .....

### **DIRECT BANK DEPOSIT** – Account details are:

Bank: CBA Warragul.            BSB: 063 532.  
Account No:                    1045 4100.  
Account Name:                Gippsland Travel Centre Pty Ltd Trust Account  
Reference:                      (Your Surname)

## PAYMENT DETAILS

Initial deposit	due by Monday, 18 September 2017	\$1000 per person
Second deposit	due by Monday, 26 March 2018	\$2000 per person
Balance of payment	due by Wednesday, 6 June 2018	

I agree to pay **\$250** per person holding deposit for the Corsica, Sardinia & Sicily 2018 tour and then to secure my place on the tour, an additional **\$750** per person balance of deposit by 18 September 2017. A refund of the deposit will only apply if a cancellation is received on or before Monday, 18 September 2017. After this date, the deposit is non-refundable. Final payment is due Wednesday, 6 June 2018.

**SIGNATURE** ..... **DATE** .....

## TRAVEL INSURANCE

Gippsland Travel requires all participants to obtain comprehensive travel insurance by the time of final payment. We offer a comprehensive policy with a reputable insurer if required.

## PASSPORT and VISA

A valid passport is required for all international travel.  
If you do not hold an Australian passport, you may require a re-entry permit.  
Some countries require a visa to be issued before you depart Australia.  
Gippsland Travel will advise you of all passport and visa requirements for this tour.

## UNUSED PORTION OF THIS TOUR

We regret refunds will not be given for any unused portions of this tour, such as meals, entry fees, accommodation or transfers.

## ITINERARY CHANGES:

Occasionally circumstances beyond the control of Gippsland Travel make it necessary to change airlines, hotels or amendments to daily activities. We will inform you of any changes as soon as they occur.