

VIETNAM TOUR 2012 BOOKING FORM

Mr/ Mrs/ Miss/Ms (Circle preferred title)

First Name _____ Surname _____

Address _____

Suburb/City _____ State _____ Post Code _____

Phone _____ Mobile _____

Email _____

Date of Birth ____/____/____

Passport No. _____ Place of Issue _____

Issue Date. ____/____/____ Expiry. ____/____/____

Dietary Requirements (for flight meals etc) _____

Pre-existing Medical Conditions: _____

Contact Details in case of Emergency

Name _____ Relationship _____

Address _____

Phone _____ Mobile _____

Deposit and Balance of payment: (Please tick where applicable)

- Early Bird payment for non refundable deposit of **\$500** by **30/9/11** and agree to pay balance of **\$3650** by **15/12/2011**.
- I have included a Cheq/M/order for a non-refundable deposit of **\$500** and agree to pay the balance of **\$3750** by the **15/12/2011**.
- I have included a Cheq/M'Order for the full cost of the tour **\$4250** (\$4150 if before 30/9/11).
- I will require a Single supplement, for which I am aware there will be an extra cost to the final balance.

Credit Card facilities/ Direct banking are available for payment by contacting tour organiser after hours on 03 52543123.

* *PLEASE NOTE:

If a Single supplement is required please add an additional \$505 to your balance payment.

For those who all ready have a passport, please send a photocopy (photo page) with your deposit as this will be needed.

Please make cheques or money order payable to: Drol Kar Buddhist Centre

Post your completed booking form, passport photocopy & deposit to our Tour Organiser at the address below:

Karen Mayer
22 Margate St
Barwon Heads VIC 3227

I am aware that the activities arranged by the Drol Kar Buddhist Centre Inc, may involve hazards and risks, which included bad weather, forces of nature, accident or illness in isolated areas.

I agree to take out my own travel insurance and agree to exempt the Drol Kar Buddhist Centre Inc from any liability.

I have read and I accept the conditions included in the General Information provided.

Signature: _____ Date: _____