



Instructions

This document DUE 60 days from the start of the trip please.

PLEASE attend to these details at the first available moment.

Please fill out this as carefully as possible and fax, post or scan/email this into our reservations team.

Latest contact details can be found on the website.

If you can only fill out one section send that in now and update the second part later, please.

Personal details & trip details

Name as on passport: First name(s): _____ Middle names: _____

Last name (Surname) : _____ Sex: Male or Female

Trip name: _____ Start date: _____

Passport Number: _____ Nationality: _____

International flight information for transfers beginning and end of trip package

Arrival City: _____ (city name) Departure City: _____ (city name)

Arrival Date: _____ (ddmmyy) Depart Date: _____ (ddmmyy)

Arrival Time: _____ Departure Time: _____

Arrival Flight No: _____ Departure Flight No: _____

Hotels: Single Supplement and Travelling Companion

Do you require a SINGLE SUPPLEMENT for your Hotel: Yes or No: ___ Camping/Lodges: Yes or No: _____

Note that some trips a single supplement is included, if not a quote for the specific trip will be sent to you for approval and payment, before we book it. If you are travelling with someone and would like to be allocated a hotel room together, please specify below. Note some trips are share basis and you will be assigned someone to share with if you do not specify someone below. EXCEPTION - females will not be required to share with a male unless specifically requested! A single room will be provided for you in this situation at no cost.

Name of travelling companion: _____ Room: Twin Share (two single beds) or Dble (one lge bed)

Further instructions: _____

Travel insurance details

Please Note: The insurance company you have chosen to take cover with has a 24 Hour world-wide emergency assistance service. Should an accident occur after you have departed for your trip, SMJ needs to be able to contact the emergency assistance section of your insurance company. Therefore we need to know who they are and a contact phone number for them. Please note this is a different number to general enquiries and claims.

Primary Policy

Second Policy (if required)

Company: _____ Company: _____

Policy Number: _____ Policy Number: _____

24 HR Emergency Provider: _____ 24 HR Emergency Provider: _____

24 HR Emergency Ph: _____ 24 HR Emergency Ph: _____

It is in your best interest to purchase travel insurance as soon as you book your trip to cover cancellation costs, for example if you become ill before the trip and can not attend some travel insurance policies will re-imburse all your lost funds.