

Birding Africa Booking Form: Guided Tour



Please complete these 2 pages, sign and fax to +27 (0) 21 531 8289,
or add a scan of your signature and email to info@birdingafrica.com.

Tour details

Tour Name or Destination: _____ Tour Dates: _____

Would you like us to reserve accommodation for you before or after the tour? Kindly specify the dates and whether you prefer a certain accommodation establishment: _____

Participant details

	First and Last Names, as in Passport	Nationality, Date of Birth	Passport Number, Expiry Date
1	_____	_____	_____
2	_____	_____	_____

Contact details

Name: _____ Email address: _____
Tel (home): _____ Mobile: _____ Fax: _____

Rooming Requirements

1. What room type do you prefer (please indicate how many twin/double/single rooms)? _____

Please note: if a single room is requested, then a single room supplement will apply. Where a single room is unavailable, you may be required to share a twin-bedded room with another tour participant.

2. With whom do you wish to share your room with? _____

Please note: if you are traveling alone and wish to share a room with another tour participant, we will do our best to find you a suitable roommate. If none can be found, a single room supplement will apply.

Diet and Health

1. Do you have any special dietary requirements? Please specify. _____

Please note: specialist foods are not always readily available on tour. In case of intolerance to for example gluten or dairy, please bring snacks from home and discuss local food options with us.

2. Do you have any medical condition we should know about and/or which would limit full participation in the tour? Please specify. _____

Flight Details *Before booking your flight, it is essential to discuss your flight times with Birding Africa. If you have already done so, please complete below details. If not, please contact us to discuss flight options.*

Inbound flight number: _____, arrival airport: _____, date and time: _____

Outbound flight number: _____, departure airport: _____, date and time: _____



Insurance

A condition of joining our tours is to have comprehensive medical and medical evacuation insurance.

Whom would you like us to contact in case of emergency? _____

Agreement

I, (first and last name) _____

have read and accepted the payment details below and the Birding Africa Terms and Conditions and Indemnity in full (see http://www.birdingafrica.com/contact_birding_africa.htm), **and I am authorised to agree with these on behalf of all the above named participants.**

- ✓ I confirm that the payment details have been specified in correspondence with Birding Africa.
- ✓ To secure my place on the tour, the booking deposit is due **7 days** after sending this booking form. The Booking deposit is GBP300, EURO350 or USD400, depending on the tour cost's currency.
- ✓ The balance towards the full tour price is due **90 days before** the tour starts.
- ✓ Without payment, I accept that my reservation is unconfirmed and may become unavailable.

Date: _____

Signature: _____

How did you initially hear about Birding Africa?

Personal recommendation / Birding Africa website / Birding Africa advertisement (please specify where) / British Bird Fair / Other (please specify) _____

Where in Africa have you birded before? _____

Besides birding, would you like to go on other specialist tours, for example focusing on mammals, butterflies, dragonflies or flowers? _____

Where else in Africa would you like to travel and how can we assist you further? _____

Checklist

Have you remembered to sign and date the booking form? Yes / No.

Have you provided your emergency contact details? Yes / No, I will send these later.

Have you provided your flight details? Yes / No, I will send these later.