

BOOKING FORM

Cut along dotted line

Please fill in the form in **BLOCK CAPITALS**. Before signing please ensure you have read and understood all Booking Conditions.

Tour Name (if applicable): _____

Date of Departure: _____

Tour Consultant: _____

Passenger Names: Please complete all sections. **Names as on the passport.**

Title (e.g. Mr, Mrs, Ms)	Full First Name	Surname	Date of Birth	Passport No.	Date of Issue Date of Expiry	Nationality
1						
2						
3						
4						

Please use a separate sheet of paper for additional passengers.

Name & Address for Correspondence

First Name: _____

Surname: _____

Address: _____

Telephone: _____

E-mail: _____

Emergency UK telephone no. and contact name whilst on holiday: _____

Room Requirements **Double** **Twin** **Single**

Meal Plan **Daily Breakfast** **Half Board** **Full Board**

Travel Insurance required: Yes/No*

* It is mandatory to have adequate travel insurance in place before your departure. Please contact us for a quotation. If you already have travel insurance, please give us the name of your insurer. If not please refer to clause 8 of our booking conditions.

Visa service required: Yes/No*

* It is your responsibility to ensure that you have all the necessary valid documentation to enable you to travel on your holiday. Please contact us if you need any information or assistance to obtain your visas.

Special Requests: _____

Payment Details – please fill in as applicable

Please send us your completed booking form with a non-refundable deposit of £200.00 per person (£400.00 per person for all Group/Specialist Tours) to Indus Tours & Travel Ltd. Balance is due eight weeks prior to departure (for Group/Specialist Tours as per Confirmation Invoice). For bookings made less than eight weeks before departure, full payment is due at the time of booking.

1. Cheque Payment

I enclose a cheque for £ _____ Payable to Indus Tours & Travel Ltd.

2. Electronic payment to our bank - Account Name: Indus Tours & Travel

Account No: 31352156 – Sort Code: 40 23 13 Bank: HSBC

3. Credit Card Payment – An extra 2% handling fee applies for all credit card transactions. There is no extra to pay for Debit Card Payments.

I wish to pay by MasterCard American Express Visa Other

Please debit £ _____ from my account.

Card No:

Expiry Date _____ Issue No/Start Date _____

Security Code _____

Cardholder's name _____

Cardholder's signature _____

Cardholder's address (if different from above) _____

I confirm that I am authorised to make this booking on behalf of the persons named above and am responsible for payment for the above booking. I am over 18. I have read and accepted all the booking conditions and tour price. I confirm that I accept on behalf of all the members of the party responsibility to ensure they comply with the entry visa, medical and insurance/holiday related arrangements.

Signed: _____

Date: _____

We will hold your information, where collected by us, and may use it to inform you of our new products in the future or to send you brochures. If you do not wish to receive such information in the future, please tick the box.

How did you hear about us? _____

Travel Agent's Stamp

Please complete and return to:
**Indus Experiences, Avanta Harrow,
 79 College Road, Harrow HA1 1BD, UK**