

# BOOKING FORM

- PLEASE**
1. CAREFULLY COMPLETE ONE FORM PER PERSON
  2. GIVE THE SAME FULL NAME BELOW AS IN YOUR PASSPORT
  3. INCLUDE A PHOTOCOPY OF THE MAIN PAGE FROM YOUR PASSPORT WHEN YOU SEND IN THIS BOOKING FORM

# Art Travel

**TOUR NAME** .....

Family Name ..... First Names .....

Mr/Mrs/Miss/Ms (please circle) Name known as .....

Age ..... Date of Birth ..... / ..... / ..... Nationality ..... (e.g. New Zealand, British)

Passport No ..... Expiry Date .....

Address .....

..... Post Code .....

Phone ..... hm / wk Mobile .....

Email address .....

Have you been on a previous Art Tour? **YES-NO** (please circle)

Frequent Flyer Number (s).....

I wish to **UPGRADE** to **PREMIUM ECONOMY**  or **BUSINESS CLASS**

Seat Preference Request Window  Aisle

I am interested in doing **EXTRA TRAVEL** when the tour has ended **YES-NO** (please circle)

**HOTEL ACCOMMODATION**

Please arrange (tick one)  single room (I will pay the extra SINGLE price)

share double (room with double bed – available on request)

share twin (room with twin beds)

(tick one)  travelling with ..... (name)

travelling alone

**AGE, HEALTH & FITNESS:**

*Important: If you have any health or mobility issues, you should discuss your fitness and mobility with us prior to booking.*

Do you have any health/fitness/mobility problems that we should be aware of?  
(If necessary, please explain on a separate page)

.....

Do you require special meal requests (e.g. gluten-free or vegetarian)?

.....

**EMERGENCY FAMILY CONTACT IN NZ:**

Name .....

Relationship to traveller.....

Phone ..... hm / wk Mobile .....

Email .....

**DEPOSIT** ... (please sign and date)

Yes, I accept the Booking Conditions for Art Tours

Please acknowledge my booking, and send me a receipt.

Signed .....

Date .....

**INSURANCE:** (please tick one)

I would like to take out your **RECOMMENDED TRAVEL INSURANCE**  
Please send me a quote and further information.

I'm taking out MY OWN insurance.  
*Important: please send a copy of your policy document (showing Insurance Co, details & emergency phone numbers) to House of Travel.*

**PAYMENT METHOD:** (please tick one)

Please send me a link to pay by card

Please send me the bank deposit information

Contact us for details: **0800 323 333**

PAYABLE TO

**TRAVEL ADVOCATES**

for all enquiries phone

Glen Armstrong

0800 323 333

021 509 093

Bank Details:

Bank: ANZ Bank

01-0797- 0950168-01

Ref Art + Surname

