



TOUR BOOKING FORM

All Art History in Focus tours are ATOL protected



PLEASE PROVIDE A SEPARATE FORM FOR EACH PERSON TRAVELLING

Art History in Focus
PO Box 613, Walton-on-Thames
Surrey, KT12 9FR
info@arthistoryinfocus.com

1. PASSENGER NAME

Title _____ First Name _____

Surname _____

Address _____

Post Code _____

Home Tel No _____

Work Tel No _____

Mobile Tel No _____

Email _____

2. HOLIDAY DETAILS

Tour Name _____

Departure Date _____

No. of nights _____

3. ACCOMMODATION DETAILS

Twin share / Double Room with _____ (insert name)

Single Room

Upgrade required (subject to availability)

4. TRAVEL INSURANCE DETAILS

I understand that I am responsible for my own travel insurance which should cover me for all eventualities

Please provide details:

Company _____

Policy Number _____

Contact Tel Number/Address _____

Any other information _____

5. API DETAILS

Please note that Advance Passenger Information (API) is required by airlines before tickets can be issued. Please check all details carefully. This information will be kept securely and confidentially.

Please note that passports must be valid for 6 months after the return date of travel.

Please provide details as they appear on your passport:

Title _____

First and Middle Names _____

Surname _____

Date of Birth _____

Citizenship _____

Country of Residence _____

Passport Number or ID card number _____

Document Type? Passport or ID Card? _____

Which Government issued the Passport or ID Card? _____

Passport or ID Card Expiry Date _____

6. PRE-BOOKABLE OPTIONS

Please indicate your preference to opt in or out of any optional extras which are offered but not included in the price of the trip such as excursions, art/cookery lessons, boat trips etc

Description of optional extra _____

Price _____

Would you like to join this? _____

7. SPECIAL REQUESTS AND DIETARY REQUIREMENTS

Please mention any special requests, dietary requirements (we need to know this in advance, for restaurant reservations) or other information we might require

Special requests _____

Dietary requirements _____

8. MEDICAL INFORMATION

Please note in detail all illnesses, known medical conditions and allergies. Please also note all medications currently being taken. It is very important that we have this information, which we require in case of an emergency. Please rest assured that it will be treated in the strictest confidence.

Medical Conditions _____

Medications _____

9. NEXT OF KIN (IN CASE OF EMERGENCY)

Name _____

Address _____

Telephone _____

Relationship _____

10. DEPOSIT PAYMENT

At the time of booking a non-refundable deposit will be payable.

Total amount paid £ _____

N.B. Full payment is due no later than 13 weeks before your departure date. If you are booking less than 13 weeks before departure please enclose full payment per person
(late payment will incur administration charges)

11. METHOD OF PAYMENT

You may pay by cash or cheque (made payable to *Art History in Focus*)

12. HOW DID YOU HEAR ABOUT US? (OPTIONAL)

13. DECLARATION

I confirm that I have read and accept *Art History in Focus's* Terms and Conditions (these can be downloaded from the *Art History in Focus* website.) I enclose the deposit (as detailed above), which is non-refundable in the event of my cancellation

Signature: _____

Date: _____

Please make sure you have answered every question – thank you!

THANK YOU!

May we take this opportunity to thank you for your booking and wish you a lovely holiday