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| **Please ensure that you enter the Name details exactly as it appears on your passport.** Write clearly in **BLOCK** capitals. This form can be used for 2 people however; the first name will be the **primary** contact.**HAVE YOU READ THE TERMS OF USE FOUND ON THE SHANTI-CHI WEBSITE? YES NO**  |

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| **PRIMARY Passenger** | **Please provide the details for the Primary contact for this booking** |
| **TITLE** | **FIRST NAME** | **SURNAME** | **D.O.B** |
|  |  |  |  |
| **PASSPORT NO:** |  | **PASSPORT EXPIRY DATE** |  | **NATIONALITY** |  |
| **ADDRESS** |  |
| **CITY** |  | **POSTCODE** |  |
| **Email** | **Mobile** | **Home** |  |
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| **Do you have any Medical Conditions or Disability?** | **YES** | **NO**  | **If YES please provide details below** |
| *All passengers traveling with AGA TOURS must complete the Medical & Health Questionnaire.* |
| *You must check with your GP for any immunisations that may be required* |
| **Do you have any special dietary requirements?** **If YES please provide details** |  |

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| **Details of Next of Kin(s) (Not on trip) in case of emergency:** |
| **NAME & ADDRESS** |  |
| **Relationship** |  | **Email** |  |
| **Mobile Number** | **Home Number** | **Work Number** |
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| **SECONDARY Passenger** | **Please provide the details for the Secondary contact for this booking** |
| **TITLE** | **FIRST NAME** | **SURNAME** | **D.O.B** |
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| **PASSPORT NO:** |  | **PASSPORT EXPIRY DATE** |  | **NATIONALITY** |  |
| **ADDRESS** |  |
| **CITY** |  | **POSTCODE** |  |
| **Email** | **Mobile** | **Home** |  |
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| **Do you have any Medical Conditions or Disability?** | **YES** | **NO**  | **If YES please provide details below** |
| *All passengers traveling with AGA TOURS must complete the Medical & Health Questionnaire.* |
| *You must check with your GP for any immunisations that may be required* |
| **Do you have any special dietary requirements?** **If YES please provide details**  |  |

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| **Details of Next of Kin(s) (Not on trip) in case of emergency:** |
| **NAME & ADDRESS** |  |
| **Relationship** |  | **Email** |  |
| **Mobile Number** | **Home Number** | **Work Number** |
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| **How did you hear about** **NNE AGWU STORYTELLING FAMILY RETREAT – GHANA 2023?** |  |

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| **Early bird Non-refundable Deposit £300 secures your seat(s) by 1st November 2021 then agreed monthly payments.****Increased Non-refundable Deposit £500 by 1st March 2022 then agreed monthly payments****All FINAL PAYMENT(S) to be received by 1st JUNE 2023****Thereafter full payment will be required.**  |
| **Please select from the following options** |
| **Passenger 1** | **£2700.00** | **14 days** |  |
| **Passenger 2** | **£2700.00** | **14 days** |  |

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| **REGISTER YOUR INTEREST**  |  **Please tick box**  |
| **Deposits being taken NOW! Payment plan Available** |

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| **Terms & Conditions** |
| **Booking:** | * Children under 16 must be accompanied by an adult
* All passengers must have a valid passport with at least 6 months before expiry date along with arranging your own Travel Insurance. Additionally, all non-British passport holders, it is your responsibility to check if you require a visa to travel and also that your passport states clearly that you have leave to remain in the UK.
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| **Cancellations** **& Refunds:** | * All deposits are non-refundable.
* Cancellations for Flight bookings - Should for any reason a ticket is not utilised at all, any subsequent refund will be subject to a cancellation fee.
* All other tickets will be charged a cancellation fee of £200 unless cancelled less than 72 hours prior to departure whereby no refund will be permitted.
* Part used tickets are not refundable.
* Tickets are not transferable.
* In the event of cancellation of a flight secured by payment of a deposit, the deposit is not refundable and not transferable.
* The only time a full refund will be given is if the Airline cancel or make any schedule changes to the flights you have booked.
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| **I have read the Booking Terms and Conditions regarding our travel arrangements and accept them on behalf of all members of my party named on this form.** |
| **Your signature** |  |
|  | **PAYMENTS TO:** **Account Name: Nne Agwu Constitution** **HSBC Bank****SORT CODE – 40-04-15****ACCT NO. 02178540****Please use your name & Ghana2023 as the reference** |
| **Booking forms to be emailed to: info@shanti-chi.com** |
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