

TRAVEL FORM



Use this form to register for your vacation. Please register your legal name as it will appear on your passport.

Name:

First Name

Surname

Date of Birth:

Date of Birth:

ID No & Passport No:

ID No.:

Passport No.:

E-Mail Address:

E-Mail Address:

Phone Number:

Area Code:

Number:

Address (Main Guest):

Address:

Guest 1: Full Name

Guest 1: Date of Birth:

Guest 1: ID No.:

Guest 1: Passport No:

Guest 1: South African Citizen?

Medical Aid Name & Number

Medical Conditions:

Guest 2: Full Name

Guest 2: Date of Birth:

Guest 2: ID No.:

Guest 2: Passport No:

Guest 1: South African Citizen?

Medical Conditions:

Medical Aid Name & Number

Emergency Contact Details:

Name of Emergency Contact Person:

First Name

Surname

Contact Numbers:

Contact Number 1

Contact Number 2

General Notes & Information:

I acknowledge that I have read this registration form completely and the information I provided is accurate. I understand that my deposit is non-refundable and other cancellation penalties will apply depending on the cancel date. I understand that all monies must be paid by the final payment date or as stated on my Invoice. If my balance is left unpaid, my reservation will be canceled immediately and I will receive no refunds. Prices for reinstated travel arrangements may be higher than the initial rate and a ZAR950.00 reinstatement / administration fee will be charged by Toer In Jou Taal regardless of the cancellation date.

By signing these documents, you confirm that this form is completed correctly, that all information is accurate, and that you accept the terms of these forms and the General Terms and Conditions of Toer In Jou Taal (PTY) Ltd (available on request or downloadable from the official website: www.toerinjoutaal.com/about)

Full Name and Surname:

Date:

Signature: