

BOOKING FORM

Important Notice: All passengers should complete all sections and return this form to:
 Voyages Jules Verne, 21 Dorset Square, London NW1 6QE (even if you are obtaining your own visa).
 Alternatively, complete on-line at www.vjv.com

The information we require on this form will help to ensure that we send the correct joining instructions to you.

TOUR NAME:

TOUR DETAILS:

Booking Reference No. UKL

Departure Date

Tour Code (office use)

Address for Correspondence:

Post Code:

IMPORTANT NOTE: Many airlines now require passengers' forenames as shown on their passports. These details are used on your tickets and corrections after ticket issue will incur charges.

1ST PERSON

2ND PERSON

Surname (as on passport)

Forenames (as on passport)

Nationality

Previous Nationality (if applicable)

Sex

Date of Birth

Place of Birth

Occupation/Position

Passport Number

Where issued

Date of Issue

Date of Expiry

Daytime Tel. No.

Evening Tel. No.

If our insurance is NOT required, please insert details of your insurance cover:
 (It is a requirement that you purchase either our insurance or an alternative
 policy providing comparable cover). Should you wish to purchase our insurance,
 please call 0845 166 7000 and state VJV in the provided box.

Please indicate the telephone number where you can be contacted 24 hours prior to departure:

Please advise the name, address and telephone number of your Next of Kin:

Post Code:

Tel. No:

I have read the Conditions of Booking, Health Notes and Visa Requirements contained in this booklet. I understand that the information I give in relation to my booking (including sensitive personal data) may be processed for the purpose of arranging my holiday and all matters arising from my holiday. This may include the transfer of information outside the European Economic Area. By signing this booking form I consent to such processing and transfer.

Signature:

Date: