

## BOOKING FORM

Please complete and return to:  
**Odyssey Overland, Floor 5 Amphenol Business Complex,  
Thanet Way, Whitstable, Kent, CT5 3JF United Kingdom**

**TOUR NAME AND DATES**

**SURNAME (MR/MRS/MISS)**

**FIRST NAMES**

**DATE AND PLACE OF BIRTH**

**OCCUPATION**

**NATIONALITY**

**PASSPORT No.**

**ADDRESS  
(FOR CORRESPONDENCE)**

**TELEPHONE (HOME/MOBILE)**

**EMAIL ADDRESS**

**EMERGENCY CONTACT NAME**

**RELATIONSHIP**

**ADDRESS**

**TELEPHONE (HOME/WORK/MOBILE)**

**MEDICAL/DIETARY CONDITIONS:**

Please state here if you have any medical disorders, disabilities, allergies or special dietary requirements.

**HOW DID YOU HEAR ABOUT US**

**DECLARATION**

I have read, understand and accept the terms and conditions of booking and insurance. I accept all the information on the website, with particular regard to the acceptance of risk, security and type of travel, and what is and is not included in the trip price and kitty payment. I agree to pay the balance no later than 8 weeks before the departure date. I enclose the amount of £500 being the deposit which is non refundable in the event of my cancellation.

**SIGNATURE**

**DATE**