

Music Lovers Tours PO Box 5001 Sunshine Coast M.C. 4560 1300 308 385 tours@musicloverstours.com.au www.musicloverstours.com.au

TOUR BOOKING FORM - PAGE 1

Preferred title for airline ticketing - eg Ms Mr Mrs Dr

TOUR - 'Viva Verdi!' 2020

| (Please complete in BLOCK CAPITALS) | |
|---|--|
| TRAVELLERS NAMES AS ON PASSPORT | TRAVELLERS PREFERRED NAME |
| 1 | 1 |
| 2 | 2 |
| POSTAL ADDRESS | FURTHER INFORMATION/SPECIAL REQUESTS (please tick where applicable) I wish to book a standard twin-share package |
| | I wish to book a single supplement package |
| PC | I would like a quote on Business Class |
| DAYTIME PHONE | I wish to book the entire tour or land only |
| MOBILE | I have special dietary needs for the flight or tour |
| EMAIL | Name of person with dietary needs & description |
| BEDDING PREFERENCE Twin Beds One Double Name of traveller you are sharing a room with if applicable: OR Please try to match me up with another traveller to share a PASSPORT DETAILS - Please attach a photocopy of the I have attached my passport photocopy: (tick) Passenger 1 | a room if possible. Yes No e main (photo) page of your passport. |
| AIRLINE INFORMATION | |
| I am a frequent flyer with EMIRATES QANTAS Emirates scheduling generally enables departure from your ne | |
| Should you wish to stay on in Europe you can generally fly hor included in your package. We simply book your return date an | me from your chosen country at little or no extra cost, using the fare ad airport from the outset. |
| I would like to depart Australia and fly to Dubai from | |

TOUR BOOKING FORM PAGE 2

MY INSURANCE COVER DETAILS

TRAVEL INSURANCE

It is compulsory for all travellers on an OPERATIF! Music Lovers Tour to have a current comprehensive travel insurance policy, including appropriate cover for Cancellation. OPERATIF! packages are non-refundable. Insurance cover should be in place as soon as you book a tour and details of this provided to us. The choice of insurer is entirely yours, including opting for Premium Credit Card Insurance if you are happy with the cover provided.

If you don't currently have a favourite insurer, we recommend contacting several for quotes and to compare their levels of cover. Be very careful to declare any pre-existing medical conditions. Even a small 'flare up' of something you thought wasn't worth mentioning can result in negation of a claim, especially if it causes you to cancel the trip.

If you are confident to obtain quotes online, perhaps start with this, otherwise phone for some quotes. There is some general information on our website too at www.operatif.com.au/insurance.html Whilst we can't make recommendations, Covermore is one specialist Travel Insurer that many will know and have used. There is a link to Covermore on our website (in the left hand bar on the travel pages.) Others to try include your auto club (eg NRMA, RACQ,) Medibank, Australian Seniors, Southern Cross and Budget Direct. If you need assistance, give us a call.

| COMPANY NAME | POLICY NUMBER |
|---|---|
| EMERGENCY CONTACT NUMBER (for the c | ountry you are travelling in) |
| MY EMERGENCY CONTACT (This person s | should be easy to contact and able to communicate by email and phone) |
| CONTACT NAME | WORK PHONE NO |
| RELATIONSHIP TO YOU | ADDRESS |
| MOBILE NUMBER | |
| | EMAIL |
| TRAVELLER FITNESS | |
| steady pace, (including some stairs and mode to restaurants and activities which are nearby. | uired to participate in these tours. The ability to walk for 15 minutes, at a erate hills) is essential. Given our centrally located hotels, we usually wa We never rush but you do need to be able to keep up with the group. E. We will accommodate the special needs of individuals where possible. |
| TERMS AND CONDITIONS | |
| These are available on our website in the side They are standard terms for booking travel. Do | bar of each of the tour description pages. co call if you can't access the document and would like a copy. |
| I have read and accept the terms and conditions for | or the tour I am booking. |
| TRAVELLER 1. Signature | Date |
| TRAVELLER 2. Signature | Date |

walk

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