

BOOKING FORM

MY NAME EXACTLY AS ON MY PASSPORT (a strict requirement of all airlines)
First Names
Surname:
(*Your passport must have at least 6 months validity beyond the end date of the tour)
HOME ADDRESS

TELEPHONE NUMBER
FAX NUMBER
EMAIL ADDRESS

SPECIAL REQUESTS or DIETARY REQUIREMENTS
(If Any).....

MY TRAVEL/HEALTH/REPATRIATION/CANCELLATION INSURANCE
(*Please note that this is Compulsory to join a tour) is arranged with:
.....
POLICY NUMBER.....

GENERAL CONDITIONS OF TRAVEL: Flights are normally arranged with an ABTA agency. It is a firm condition of the acceptance of a booking by MB Art & Architecture Tours that each participant confirms that he or she has arranged their own completely adequate personal Travel and Health and Cancellation Insurance cover. No liability or responsibility will be accepted for the death or injury, accident or damage to the person or property (including theft or loss) of any subscriber during or arising from their participation of any tour.

I ENCLOSE MY £200 DEPOSIT (Refundable if we cancel the tour) by cheque payable to Michael Barker Client Account. The balance is due 8 weeks before departure.

SIGNED DATE

Please return to Michael Barker, 12 rue Clairaut, 75017 Paris, France