



## RESERVATION FORM

MAILING ADDRESS: 75 OLD TURNPIKE RD PORT MURRAY NJ 07865

FIRST TRAVELER	SECOND TRAVELER
Name (as in passport) _____	Name (as in passport) _____
Passport No. _____ Nationality _____	Passport No. _____ Nationality _____
Issued _____ Expires _____	Issued _____ Expires _____
Address _____ _____	Address _____ _____
Telephone _____	Telephone _____
Fax _____ Date of Birth _____	Fax _____ Date of Birth _____
e-mail address _____	e-mail address _____
Dietary Requirements _____	Dietary Requirements _____
Occupation _____	Occupation _____
Celebrating a special occasion? _____	Celebrating a special occasion? _____
Emergency contact _____ Tel _____	Emergency contact _____ Tel _____
Approximate weight (for inter-camp flights) _____	Approximate weight (for inter-camp flights) _____

**CANCELLATION:** If it becomes necessary for you to cancel your trip, the following charges apply: 60 days or more from the starting date of the trip the deposit is charged; 59 days or less 100% of total tour price is non-refundable. Cancellation and/or changes for any reasons while traveling are 100% non-refundable. Any refunds offered by hotels, safari camps or ground operators within the cancellation period (if any) will be subject to a 20% service charge. Any voluntary changes to a confirmed itinerary with 2 weeks of departure will incur a fee of \$75 per change.

**PAYMENT:** A 20% deposit is payable upon confirmation of the itinerary. Full final payment is due if reservations are made within 8 weeks of departure. These may vary depending on the properties/services booked.

Payment can be made by **check** or credit card. **If payment is to be made by credit card please complete Authorization Form on reverse.**

**WHAT'S INCLUDED:** Accommodations, meals, sightseeing, transfers and other activities specified in the itinerary.

**WHAT'S NOT INCLUDED:** All items not included in the itinerary including insurances, immunizations, passport, gratuities or visa fees. A valid passport is required for all countries. Visa requirements vary depending on nationality. It is the travelers' responsibility to ensure they get the necessary visas.

**TRAVEL PROTECTION:** Travel Protection plans are available and recommended to help protect you and your trip investment. Travel Protection Policies offered by most major travel insurance providers include benefits such as Trip Cancellation, Trip Interruption, Emergency Medical and Emergency Evacuation/Repatriation, Trip Delay, Baggage Delay and more. Please contact us to learn more about the available plans.

**TRAVELER'S RESPONSIBILITIES:** By signing this application, I acknowledge that I have read, understand, and agree to all of the terms and conditions contained in both pages of this contract, including, but not limited to, the policies of payment, pricing, cancellations, refunds, complaints and insurance. I understand that without cancellation and bankruptcy insurance I risk losing all monies paid for the trip as per the terms laid out in this contract. I have no physical, mental or other condition that would create a hazard for myself or other travelers. I understand that the traveler assumes full and complete responsibility for checking and verifying any and all passport, visa, vaccination, or other entry requirements for the countries they are visiting. Traveler should consult the State Department website <http://www.travel.state.gov> for the latest travel advisories. I believe Maxim Tours Ltd to have acted in good faith, I understand the nature of the trip I am booking and accept all recommendations and reservations made by Maxim Tours Ltd on my behalf. I authorize & agree to pay the credit card charge on page 2 of this Reservation Form. **SEE REVERSE FOR MORE INFORMATION**

\_\_\_\_\_  
Date

\_\_\_\_\_  
First Traveler Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Second Traveler Signature

