

COMFORTABLE HIKING HOLIDAYS RESERVATION FORM

DESTINATION _____

NUMBER OF SPOTS TO BE RESERVED _____

land only land plus group airfare

NAME(S) AS THEY APPEAR ON YOUR PASSPORT

ADDRESS

PHONE

Home: _____ Work: _____

Email: _____

COMPLETE AS APPLICABLE

- I would like a single room (kindly call C.H.H. to enquire about cost of single supplement)
 I would like to share a room with someone of the same sex.
 Special dietary requirements (please specify _____)

INSURANCE

- Yes, please contact me concerning the various insurance options/rates for my trip. Please provide your date of birth _____
 I hereby decline any trip insurance offered by Comfortable Hiking Holidays.

It is customary for Comfortable Hiking Holidays to share the names, addresses and phone numbers of its guests with other members travelling on the same trip. Please check this box if you give us permission to share this information with other people on the same trip as you.

Additional remarks

I enclose deposit/full payment of \$ _____

Please make cheques payable to COMFORTABLE HIKING HOLIDAYS.

If you are paying by credit card, kindly complete the information below.

Visa Mastercard Amex

Card no. _____

Expiry date _____

3-digit security code on the back of your card _____

Cardholder name _____

Signature _____

Mail deposit and reservation form to:

Maddalena Molino
Comfortable Hiking Holidays
251 Consumers Road
7th Floor
Toronto, ON M2J 4R3
Canada

Direct Tel: (416) 445-2628

Fax: (647) 439-2628

Email: info@letshike.com

www.letshike.com

I have read and agree with the TERMS & CONDITIONS set forth above.

(Signature, Guest 1) _____

(Signature, Guest 2) _____