



Jersey Costa Rica invite you to the WJCB Annual Meeting Tour 2017



BOOKING FORM



To help you, please complete the following information

PERSON 1					
Mr. / Ms. / Mrs.		First Name:			
Last Name:		Date of Birth:			
Nationality:		Passport number:			
Passport issue date:		Passport expiry date:			
Address:					
Country:		Telephone:			
Mobile phone:		Email:			
Flight Details: (must arrive and departure must be booked in San José International Airport Juan Santa María)					
Date of Arrival:		Arrival flight number:			
Time of Arrival:					
Date of Departure:		Departure flight number:			
Time of Departure:					
Emergency contact details:					
Contact Name:		Relationship:			
Telephone:		Email:			
Please tell us here of any special requests (i.e. food allergies, mobility etc.):					
The official language of the Tour and Meeting will be Spanish and English, are you able to understand?		Yes		No	

PERSON 2										
Mr. / Ms. / Mrs.		First Name:								
Last Name:		Date of Birth:								
Nationality:		Passport number:								
Passport issue date:		Passport expiry date:								
Address:										
Country:		Telephone:								
Mobile phone:		Email:								
Flight Details: (must arrive and departure must be booked in San José International Airport Juan Santa María)										
Date of Arrival:		Arrival flight number:								
Time of Arrival:										
Date of Departure:		Departure flight number:								
Time of Departure:										
Emergency contact details:										
Contact Name:		Relationship:								
Telephone:		Email:								
Please tell us here of any special requests (i.e. food allergies, mobility etc.):										
The official language of the Tour and Meeting will be Spanish and English, are you able to understand?							Yes		No	
All rooms will be non-smoking. Which room would you like?						Single		Double		
It is a requirement that you have adequate travel insurance for your trip and to help us assist you if there is an issue. Please tell us these details opposite.										
		Our Insurers are (Full company name):								
		Our Insurance Policy Number is:								
		24 Hour Insurance Emergency Number:								

Please Choose one of the options below for your trip: (US dollars)		
Tour Options	Option 1. June 10-18. 1 week	Option 2. June 10-25. 2 weeks
Price Single	\$ 2,100	\$ 3,060
Price Double	\$ 1,560	\$ 2,800
Select		

PAYMENT

<p>Please send your completed form back by no later than 1st May 2017 to email: wjcbcostarica2017@gmail.com. The deposit please must by Bank Transfer (please ask for details).</p>
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