

# Sasendle Adventure Tours



This is the Sasendle way: **ONE LIFE LIVE IT**

## BOOKING FORM

**Note: This form is to be completed and sent to Sasendle Adventure Tours at [info@sasendle-adventures.com](mailto:info@sasendle-adventures.com) or fax to +27 21 9113075 who will do your tour bookings.**

**Email Address: [info@sasendle-adventures.com](mailto:info@sasendle-adventures.com) or [reservations@sasendle-adventures.com](mailto:reservations@sasendle-adventures.com)**

**Physical Address:**  
**28 Panorama Street**  
**Panorama**  
**Parow**  
**7500**  
**Cape Town**  
**South Africa**

**Tel Number: +27 21 9112275**  
**Cell Number: +27 84 800 8300 or +27 82 888 9643**  
**Fax Number: +27 21 9113075**

**THIS BOOKING FORM IS IN CONJUNCTION WITH BOOKING TERMS AND CONDITIONS. PLEASE CONTACT YOUR CONSULTANT IF YOU HAVE NOT RECEIVED THESE CONDITIONS.**

### **TRIP DETAILS:**

Departure date and Flight Number:	
Arrival date Flight Number:	

### **PASSENGER DETAILS:**

Please complete this form as per your passport, one per family and return it to Sasendle Adventure Tours

(PLEASE TAKE NOTE: That should your ticket be incorrectly issued due to booking form not been completed as per the above request. **Sasendle Adventure Tours** will not be held responsible for any additional penalties implemented by the airline.)

Please remember to include: Initials/Surname/Address/Date of Birth **for all Passengers** & Children ages

Initials	Surname	Address	Date of Birth

### **SLEEPING ARRANGEMENT IN Lodges and Guest Houses:**

Please supply us with the correct sleeping arrangements *you* require per lodge and Guest House for your safari.

Initials	Surname	Single or Double


**DEPOSIT PAID:**

PAID (PLEASE TICK)	Amount and Currency:
YES / NO	Proof of payment: Email : Fax:

**DO YOU REQUIRE TRAVEL INSURANCE?**

*Sasendle Adventure Tours suggests special travel insurance (as compulsory) please speak to your consultant for more information.*

<b>NAME OF PERSON TO CONTACT IN CASE OF EMERGENCY</b>
TEL/Cell number # with area code:
RELATIONSHIP:
E-MAIL Address:

I/We have read, fully understood and accept the Conditions of the contract as set out on the pages attached and the Terms & Conditions on our website: [www.sasendle-adventures.com](http://www.sasendle-adventures.com)

Further I am of age and authorised to effect reservations and the conditions applying thereto on behalf of all those detailed above.

I/We confirm that I/We have secured the necessary visas, inoculations and are in possession of a passport valid 6-12 months from day of departure.

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Signature of customer  
(If under 21, parent of guardian’s signature)

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Name (Print)

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Date

