

**Africa Safari, Botwana and Cape Town - 2018**

**Form Instructions:**

1. Print this document.
2. Fill out and sign the following pages.
3. Mail or email:

Catharine Daley  
8208 Nice Way  
Sarasota, FL 34238

email: [cathydaley@aol.com](mailto:cathydaley@aol.com)  
phone: (941) 302-1004

**Registration Form**

**Africa Safari 2018 with Cathy Daley**

**September 25th, 2018**

**Traveler's Names: The names should read AS STATED ON YOUR PASSPORT (this is very important for inter-Africa air ticketing).**

**Traveler 1:** \_\_\_\_\_ **DOB:** \_\_/\_\_/\_\_

**Traveler 2:** \_\_\_\_\_ **DOB:** \_\_/\_\_/\_\_

**Contact info: This is the address to which important travel documents and correspondence will be sent.** It is important for you to include your e-mail address, as this will be used to communicate trip updates and exciting pre-departure information to you.

**Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Country:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Alternate Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Liability signature required for each person – Africa 2018.**

**I/we agree that Catharine Daley shall not be held responsible for any damage, loss or delay. I/we agree to assume all risks associated with the trip and agree that no liability will be attached to Catharine Daley for any personal injury, illness, delay, loss or damages to property or health. Catharine Daley shall not be held liable or responsible for any expenses, including but not limited to lodging, meals, and transportation incurred by delays or other uncontrollable issues outside of the program.**

**In the event that you need to cancel because of unexpected circumstances, and as a general practice, I recommend that you protect your investment with travel insurance for your trip. To purchase travel insurance you can go to [www.travelsecure.com](http://www.travelsecure.com) as a suggestion.**

**By making a payment, I indicate that I understand and agree to the terms and conditions of this contract.**

**Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

***Africa Safari 2018 - Guest Information Form***

**Traveler's Names: The names should read AS STATED ON YOUR PASSPORT  
(this is very important for inter-Africa air ticketing.**

**Traveler 1 Name :** \_\_\_\_\_

Passport #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Issued By: \_\_\_\_\_

**Traveler 2 Name:** \_\_\_\_\_

Passport #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Issued By: \_\_\_\_\_

**Does anyone in your party have any dietary requirements or food allergies?**

**Does anyone in your party have any other medical conditions or allergies?**

**Is this trip in recognition of any special occasions?**

**Have you traveled to Africa before? If so, where?**

**Do you have specific drink preferences (such as a particular red or white wine, cocktail etc.)?**

**Anything else we should know?**