



Women With Wings

Tour Registration Form - One Per Participant

Name: (As it appears on passport) _____

I am usually called: (if different from above) _____

Address: _____ Postal Code: _____

Ph: Daytime: _____ Evening: _____

Email: _____ Date of birth: _____

Primary Medical Care Coverage Number: (Provincial Medical) _____

Dietary Restrictions or Food Allergies and/or Medical Conditions we should be aware of:

Do you smoke: Yes ___/No___ I wish to have a single room: Yes ___/No___ WWW to find me

a Room-mate if possible Yes ___/No___ I will share with (name): _____

Emergency Contact: _____ Phone: _____

Please register me for the following trip: _____

I am travelling with the following people: _____

I understand that a deposit in the amount of \$_____ is required to confirm my booking and that
The balance will be payable on the date shown on the trip information flyer.

I wish to pay by Cheque (enclosed)_____ Credit Card: Type _____ Amount:_____

Credit card number: _____ Exp: _____ Sec: _____

Name as it appears on credit card: _____

*Please note: All deposits and final payments are non refundable and we recommend that you purchase trip
cancellation and out of country medical protection. Travel Concepts will contact you upon receipt of registration to
discuss your personal insurance needs.*

Please return completed form & signed responsibility waiver on reverse side

Travel Concepts
103 – 3151 Woodbine Drive, North Vancouver, V7R 2S4
Phone: (604) 986-2262 Fax: 604 986 2246





Women With Wings

WAIVER AND RELEASE

We are responsible to you for arranging the services and accommodation offered in connection with your vacation only as intermediary between you and the various airlines, hotels, car rental operators, and the other suppliers. Each supplier has its own terms and conditions by which you will be bound.

Travel Concepts and Women With Wings assume no responsibility or liability in connection with services of any aircraft, motor or conveyance that may be used, either wholly or in part, in the performance of its duty to the passenger; or for any hotel proprietor, or hotel service or for any other person engaged in carrying out the purpose for which tickets are issued.

In the event that it becomes necessary or advisable for the comfort or well being of the passenger, or for any reason whatsoever, to alter the itinerary or arrangement such as alternatives may be made without liability or penalty to Travel Concepts and Women With Wings.

Furthermore, Travel Concepts and Women With Wings accept no responsibility for loss of tickets or coupons, nor for the loss of personal articles and effects, nor for personal accidents, injury or death, nor for losses of additional expenses due to delays or damage in transportation or other services, quarantine, sickness, strikes, war, warlike conditions, weather or any other causes.

I have read the above and agree to abide by these conditions.

Name: _____

Signature: _____

Date: _____

Witness: _____

NB: *Travel Concepts or Women With Wings staff are unable to witness tour registration forms*

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