

Did you already made one safari travel before? __NO __YES



Wildlife Photography Course

| Full Name: | Date: | | | | |
|---|---|------------------------|--------------------------------|--|--|
| Zip:Place: | Full Name: | | | | |
| Zip:Place: | Address: | | | | |
| Date of birth: | | | | | |
| Passport n°: | Email: | Phone n°: | | | |
| (Important: This will be your identification document for your entire travel and event.) Vegetarian?NO;YES, but I eat milk products and eggs. Vegan?NO;YES Health restrictions: | Date of birth: | Profession: | | | |
| Vegetarian?NO ;YES, but I eat milk products and eggs. Vegan?NO ;YES Health restrictions: | Passport n°: | _ Validity: | Nationality: | | |
| Allergies: | (Important: This will be your ident | ification document for | your entire travel and event.) | | |
| Allergies: | Vegetarian?NO ;YES, but I eat milk products and eggs. Vegan?NO ;YES | | | | |
| If you are travelling with a companion, please indicate the name of the person you will share the accommodation with: YES, I accept to share the accommodation, if there is someone in the same condition. How did you hear about our courses? Contact person in case of emergency during the event: Name: Phone n°: | Health restrictions: | | | | |
| accommodation with: YES, I accept to share the accommodation, if there is someone in the same condition. How did you hear about our courses? Contact person in case of emergency during the event: Name:Phone n°: | Allergies: | | | | |
| YES, I accept to share the accommodation, if there is someone in the same condition. How did you hear about our courses? Contact person in case of emergency during the event: Name:Phone n°: | If you are travelling with a companion, please indicate the name of the person you will share the | | | | |
| How did you hear about our courses? Contact person in case of emergency during the event: Name: Phone n°: | accommodation with: | | | | |
| How did you hear about our courses? Contact person in case of emergency during the event: Name: Phone n°: | | | | | |
| Contact person in case of emergency during the event: Name: Phone n°: | YES, I accept to share the accommodation, if there is someone in the same condition. | | | | |
| Name:Phone n°: | How did you hear about our courses | ? | | | |
| Name:Phone n°: | | | | | |
| | Contact person in case of emergency during the event: | | | | |
| Relationship: Country: | Name: | Ph | one n°: | | |
| | Relationship: | Co | ountry: | | |

| If, YES, when? | Where? |
|--|--|
| Photographic equipment: | · |
| Price of the event you are registering | g for: 2'850€ . |
| (The total price of the event must be | e settled within 60 days of the beginning of the event.) |
| Registration of 30% of the event price | e: 855€ . |
| (Registration will only be accepted a | after full payment or 30% of the event value.) |
| YES, I transfer the full amount ; | |
| YES, I transfer 30% of the event | price to confirm my registration to the account: |
| Name:Maia Wildlife Safari Experienc | ces IBAN: CH25 0078 9100 0053 2300 0 |
| Bank: Banque Cantonale du Jura | Swift code: BCJUCH22 |
| Terms and Conditions concerning the laccept in its entirely. | e program of the event I have chosen, and that a have read the e event in which I register, on the website www.maiawildlife.com and |
| Place and date: | Signature: |
| Mobile or Wha | i Experiences, Rue de la Gare 327, 2944 Bonfol, Switzerland atsApp: +41 79 558 29 51 or +27 72 355 2392 Email: maiawildlife@gmail.com |
| (Travel information is just for transfer | rs purpose, and can be provided later.) |
| | Travel informations : |
| Arrival date: | Departure date: |
| Arrival time: | |
| Flight n°: | Flight n°: |
| | |