



**OFFICIAL BOOKING FORM**

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 1177 Vlughal Ave, Weltevreden Park  
 Johannesburg 2196

Date : \_\_\_\_\_

Tour Name: \_\_\_\_\_ Departure: \_\_\_\_\_ Return: \_\_\_\_\_

**TO BE COMPLETED BY THE PASSENGER**

<b>Booking number:</b>				<b>Sphinx Travel &amp; Tours Consultant:</b>		
<b>Title</b>	<b>Surname:</b>	<b>First Name:</b>	<b>Date of birth:</b>	<b>Passport Number &amp; Nationality</b>	<b>Expiry date:</b>	<b>Identity No. :</b>
<b>Special Request: e.g. non smoking, Meals, accommodation, seating etc</b>			<b>Physical Address:</b>		<b>Name of person to contact in case of an emergency:</b>	
					<b>Mr/Mrs/Miss:</b>	
					<b>Relationship:</b>	
					<b>Tel:</b>	<b>Code:</b>
<b>(Subject to availability)</b>			<b>Code:</b>			
			<b>Tel:</b>			

TRAVEL AGENCY:

TRAVEL AGENT:

**PLEASE NOTE:** Documents will be released 48Hrs after Sphinx Travel & Tours has received full payments. No documents will be released without Full Payment this booking form duly completed, signed and returned to Sphinx Travel & Tours .

**SPECIAL NOTES:**

We strongly recommend that travel insurance is taken out prior to your departure. Attached please find Travel Insurance form to be completed

I/We enclose a deposit of R \_\_\_\_\_

The balance of the tour price will be paid by:

Cash     Cheque     Bank transfer

Cheque no. \_\_\_\_\_ Account no. \_\_\_\_\_

Date. \_\_\_\_\_

Bank Name: \_\_\_\_\_

OR for airline

State Card name and Number: \_\_\_\_\_

\_\_\_\_\_

**TO BE SIGNED BY PASSENGER**

I have read, fully understood and accept the attached Terms & Conditions of Sphinx Travel & Tours set out and in the brochure. Further I am of age and authorized 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 passports, visas and inoculations for this tour.

Name (block letters): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (If under 21, parent or guardian's signature)