



INDUS DISCOVERIES  
travel. discover. inspire.

## BOOKING FORM

Please fill in the form in **BLOCK CAPITALS**. Before signing please ensure you have read and understood all Booking Conditions.

**Name of Tour** (if applicable):

**Date of Arrival:**

**Travel Consultant:**

**Traveller Names:** Please complete all sections. **Names as on the passport.**

Title (e.g. Ms. Mrs. Mr.)	First Name	Surname	Date of Birth	Passport No.	Date of Issue Date of Expiry	Nationality
1						
2						
3						
4						

Please use a separate sheet of paper for additional guests.

**Name & Address for Correspondence:**

**First Name:**

**Surname:**

**Address:**

**Telephone:**

**Email:**

**Emergency home country telephone no. and contact name whilst on tour:**

**Room Requirements:**

☐

Double

☐

Twin

☐

Single

**Meal Plan:**

☐

Daily Breakfast

☐

Half Board

☐

Full Board

**Travel Insurance:**

Please arrange comprehensive Travel Insurance to cover the entire trip before departure.

**Visa:** You need a valid visa to visit India.

Citizens of most countries/territories can apply online for an e-Tourist Visa to travel to India. For details & requirements go to <https://indianvisaonline.gov.in/>

**Special Requests** (if any):

**Payment Details:**

Please send us your completed booking form with a deposit of 20% of the total invoice amount per person to Indus Discoveries Pvt. Ltd. Balance is due ten weeks prior to departure (for Group/Specialist Tours as per Confirmation Invoice). For bookings made less than ten weeks before departure, full payment is due at the time of booking.

You can make your payment by electronic transfer to our bank. Our bank details are:

<b>Beneficiary Name</b>	Indus Discoveries Pvt. Ltd.
<b>Beneficiary Address</b>	FF 30 JMD Galleria, Sohna Road, NCR, Gurgaon Haryana 122001
<b>Bank Name</b>	ICICI Bank
<b>Bank Address</b>	12A,12B, JMD Galleria, Sector-48, Sohna Road, Gurgaon, Haryana-122018
<b>Account No.</b>	777705532955
<b>Beneficiary Bank SWIFT</b>	ICICGB2L

**How did you hear about us?**

☐

I confirm that I am authorised to make this booking on behalf of the persons named above and am responsible for payment for the above booking. I am over 18. I have read and I accept all the booking conditions. I confirm that I accept on behalf of all the members of the party responsibility to ensure they comply with the entry visa, medical and Insurance/travel related arrangements.

**Signed:**

**Dated:**

We will hold your information and may use it to inform you of our new products in the future or to send you brochures. If you do not wish to receive such information in the future, please tick the box.

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