## Travelling Femmes

## Booking Form

We look forward to welcoming you on our Travelling Femmes tour soon! Please tell us a little bit more about you.

Event:

Date:

Signature:

Date:



Travel Managers
As individual as you are

Personal and contact information	
Name:	DOB:
Address:	
Email:	Phone:
Emergency contact name:	Phone:
Frequent flyer number:	Seat request:
Medical conditions / Dietary requirements	
Please let us know any medical conditions you have: (Eg. Heart conditions, diabetes, high blood pressure).	
Please list any medications you are currently taking:	
Please advise us of any dietary requirements and/or allergies you have:	
Other important information	
We want you to have the best possible experience with us. If there's anything else you feel we need to know or would like to request please tell us here:	
Photos taken during this event may be used to promote TravelManagers and Travelling Femmes via social media and other media channels. Please initial if you accept:	
By proceeding with this booking you confirm that you have read, understood and agree to be bound by our booking terms and conditions and privacy policy as stated on your itinerary.	
Name:	