

# Ventures Birding

*Putting the fun back into birding!*

## Ventures Birding Tours International Tours Reservation Form

Please fill out this form for the tour you area interested in and either e-mail it us at [Travel@birdventures.com](mailto:Travel@birdventures.com) or mail it to PO Box 1095, Skyland, NC 28776. Thank you. Please see the payment information towards the bottom of this form.

Tour \_\_\_\_\_ Date \_\_\_\_\_  
Full Name \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Address \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Gender M \_\_\_ F \_\_\_ (This is for room-mate selection if required on longer tours)  
Second Person's name \_\_\_\_\_

Only 1 form is needed if both people live at the same address

### **Emergency Contact Person**

Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

### **General Information**

How is best to contact you? Phone \_\_\_\_\_ E-mail \_\_\_\_\_ Mail \_\_\_\_\_

Would you like for us to send you a flyer, itinerary and birdlist from previous tour Yes \_\_\_ No \_\_\_  
(The information is exactly the same as that already up on the website)

Are you a smoker? Yes \_\_\_ No \_\_\_  
Do you have any difficulty walking regular trails? Yes \_\_\_ No \_\_\_  
If yes, please explain \_\_\_\_\_

Have you traveled with Ventures Birding Tours before? \_\_\_\_\_  
How did you learn about Ventures Birding Tours? \_\_\_\_\_

A separate health and interest form will be sent to all folks joining us on longer tours

I would like to share a room Yes \_\_\_ No \_\_\_  
I already have a room-mate Yes \_\_\_ No \_\_\_ Name \_\_\_\_\_  
(If we cannot find you a suitable room-mate, you will have to pay the single supplement)

Special Needs \_\_\_\_\_

Are there any other details you require? \_\_\_\_\_

### **Flight Information**

For many years Ventures has used Cathy King at Holiday Travel in Winston-Salem for our travel arrangements. Cathy has all of the information on our upcoming tours and should you wish for her to help you out her details are as follows.

E-mail: [adventuretrips@hotmail.com](mailto:adventuretrips@hotmail.com) Phone: 1.888. 850.9254

I wish to make my own travel arrangements Yes \_\_\_ No \_\_\_  
Please remember to let the Ventures office know all of your travel details.

### **Passport Information**

Name \_\_\_\_\_ Nationality \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Passport Number \_\_\_\_\_ Date and Place of Issue \_\_\_\_\_  
Expiration Date \_\_\_\_\_

### **Person 2 Passport Information**

Name \_\_\_\_\_ Nationality \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Passport Number \_\_\_\_\_ Date and Place of Issue \_\_\_\_\_  
Expiration Date \_\_\_\_\_

### **Payment Details**

I will submit my payment by Paypal Yes \_\_\_ No \_\_\_  
I will call the office to pay by credit card (Visa or MC only) Yes \_\_\_ No \_\_\_  
Alternatively you can write the cc # here \_\_\_\_\_ Expiration Date \_\_\_\_\_  
I will mail (am enclosing) a check Yes \_\_\_ No \_\_\_

Each participant will be sent and asked to sign a Disclaimer and Assumption of Risk and Liability Release Agreement