



# BOOKING FORM

Registered Office

Latin DMC Ltd | 2<sup>nd</sup> Floor | 145/157 St John Street | London | EC1V 4PY  
Tel 0203 - 287 7587 Fax 0203 - 514 1641 Skype latintravel.co.uk Email [info@latintravel.co.uk](mailto:info@latintravel.co.uk)

Please complete this booking form and return it to us with by fax or scanned copy by email .Then a deposit is required to initiate the booking process. Please also ensure you have read our booking conditions as we cannot be held responsible for any mistakes or subsequent charges related to incorrect information on this form.

payment by bank transfer (see below for details), debit card or check (payable to Latin DMC Ltd Trust Account) for the balance of your holiday. If you wish to pay the final balance of your holiday by credit card, a 2% fee will be charged reflecting our incurred costs. This does not apply to debit card payments (Delta/Maestro/ Switch). Please note, full payment is required if less than 2 months prior to departure.

Tel: \_\_\_\_\_

Relation to you: \_\_\_\_\_

### PARTY LEADER NAME & ADDRESS FOR CORRESPONDENCE

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

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Tel (day): \_\_\_\_\_

Tel (eve) \_\_\_\_\_

Mob: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### PAYMENT METHODS

#### BANK TRANSFER

TTA Trustees (UK) Ltd Trustee of  
Client Monies of Latin DMC Ltd  
Account Number : 45170029 Sort Code: 50-41-01  
IBAN : GB70NWBK50410145170029 BIC : NWBKGB2LXXX  
SWIFT CODE : NWBKGB2LXXX Bank : Nat West Branch :  
Piccadilly & New Bond Street, London

#### CARD PAYMENT

Use our online facility: [www.latintravel.co.uk/payment.html](http://www.latintravel.co.uk/payment.html)

\* The amount of the deposit required is based on the value of the holiday. Please include £200 per person (excluding infants) for holiday value of up to £2,000 per person; £400 per person up to £4,000; £1,000 per person up to £10,000; £1,500 per person for £10,000 or over. In certain circumstances we may need to include additional sums for elements of the holiday that require pre-payment to a third party.

### ADDITIONAL INFORMATION

Please provide any additional information including: dietary, childcare, cots, seating requirements, flight details if you are arranging this yourself, etc:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### HOLIDAY DETAILS

Holiday name: \_\_\_\_\_

Quote reference: \_\_\_\_\_

Departure date: \_\_\_\_\_

### PAYMENT DETAILS

All payments must be made through the party leader. Whilst for your convenience we are happy to take deposits by credit card, we prefer

### EMERGENCY CONTACT DETAILS

(Someone who is not travelling with you):

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

### DECLARATION

I have read, understood and agree to Latin DMC Ltd.'s booking conditions, "important information" and privacy statement. I am authorised to make the booking on the basis of these booking conditions, the important information and the privacy statement by all persons named on the booking and by their parent or guardian for all party members who are under 18 when the booking is made. I accept responsibility for myself and all members of my party for complying with the necessary health, immigration, visa and passport requirements relevant to my party's booking. I confirm that I am 18 years of age or over. I confirm that to the best of my knowledge all information listed on this booking form is correct. I agree to make all payments due by the due date(s).

Signed: \_\_\_\_\_

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

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





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## Individual Details

Please write your title and full name, exactly as it appears in your passport. If booking international airline tickets with us you please also fill out the APIS information.

### **Guest 1**

Title/Name/Surname: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Mobile: \_\_\_\_\_

### **Airline Advanced Passenger Information (APIS)**

Full passport information is required for international travel and is an airline APIS requirement.

Passport No: \_\_\_\_\_ Country of Issue: \_\_\_\_\_

Expiry Date (dd/mm/yy): \_\_\_\_\_ Nationality: \_\_\_\_\_ Date of birth: \_\_\_\_\_

### **Guest 2**

Title/Name/Surname: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Mobile: \_\_\_\_\_

### **Airline Advanced Passenger Information (APIS)**

Full passport information is required for international travel and is an airline APIS requirement.

Passport No: \_\_\_\_\_ Country of Issue: \_\_\_\_\_

Expiry Date (dd/mm/yy): \_\_\_\_\_ Nationality: \_\_\_\_\_ Date of birth: \_\_\_\_\_

### **Travel Insurance**

It is a condition of booking that you must be covered by suitable travel insurance. Please tick which is applicable.

We have no insurance and request that you put me in contact with a suitable insurer.

We have suitable insurance and do not require advice in this area.

Signed \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

by signing you are agreeing to the requirements of travel insurance

