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## Registration Form - Chile & Argentina

### BOOKING INFORMATION AND TRIP REQUIREMENTS

- 1) A **deposit of \$500 per person** by cheque, money order or bank draft will reserve your place on the tour.
- 2) Please make cheques, money orders or bank drafts payable to **AgriTours Canada. Inc.**
- 3) **Deposits, Interim and Final payments**, including any insurance or taxes, is due based on rate schedules that follow.
- 4) All Canadian and American citizens need **passports** that are valid for six (6) months AFTER the scheduled visit.
- 5) It is recommended that your Tetanus, Hepatitis A and Hepatitis B vaccinations be current, and that routine (childhood) immunizations (e.g.: diphtheria, polio, measles) are up-to-date. See further information on page 2 of this form.
- 6) **Cancellation Policy:** Refunds are processed through travel insurance purchased prior to the tour. Once airfare has been purchased for each participant, cancellation of flights is not possible. Some portion of land costs may be refundable up to 45 days from day of departure on a pro-rated basis.

**PLEASE FILL OUT THE FOLLOWING REGISTRATION FORM AND RETURN IT TO AGRITOURS CANADA**



### Agri-Adventure Tours 2012 Participant(s) Information and Registration Form

**Please select tour:**

**Argentina/Chile – February 26 – March 11** – International and domestic S. America air included

OR  **Portugal /Spain – February 12 – 25, 2012** – International flights included or on your own

**No. of interested participants:** \_\_\_\_\_ **Citizenship Person 1:** \_\_\_\_\_ **Person 2:** \_\_\_\_\_

**If travelling single:** willing to share with another? (Double occupancy rate will apply) Yes  No

**Person #1 Name** (as it appears on Passport) \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_  
Province/State \_\_\_\_\_ PC/Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_ Smoking \_\_\_\_\_ Non-smoking \_\_\_\_\_  
Insurance needed: Yes  No  Date of Birth \_\_\_\_\_ (MM/DD/YYYY)  
Allergies/food sensitivities or medical conditions \_\_\_\_\_

**Person #2 Name** (as it appears on Passport) \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_  
Province/State \_\_\_\_\_ PC/Zip Code \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_ Smoking \_\_\_\_\_ Non-smoking \_\_\_\_\_  
Insurance needed: Yes  No  Date of Birth \_\_\_\_\_ (MM/DD/YYYY)  
Allergies/food sensitivities or medical conditions \_\_\_\_\_

**AgriTours Canada Inc.** would be pleased to quote on your travel, health and baggage insurance. Please note that ALL participants are requested to obtain, at the least, medical insurance to cover the trip. Trip Cancellation insurance packages that include your health insurance are your most economical purchase as the health insurance is included at a discounted rate in the "package pricing" with a saving of up to 30% over buying them individually.

**Trip Cancellation insurance MUST be done at time of Booking!**

Travel and health related insurance can also be booked with your local travel agent or AgriTours Network Agency.

