GROUP MEDICAL DIRECTOR DR. MEL BORINS



CME, BEACH & CULTURAL TOUR OF BALI **APRIL 24 - MAY 10, 2020 REGISTRATION / BOOKING FORM**

REGISTER BY DEC 9, 2019 AND SAVE \$1,000 / COUPLE

NAMES OF PASS (Title)	SENGERS First name	(EXACTLY AS THEY APP	PEAR ON YOUR PASSPO Last name	Birthdate (D/N	IM)	Academic progra Yes	am reg? No	Special meal requirements (vegetarian etc)
3								
IF YOU ARE INTERESTED IN MAKING A PRESENTATION, PLS LET US KNOW YOUR SUBJECT								
PASSPORT INFORMATION								A
1	Passport No.	Date of issue	Date of expiry Pla	ace of issue		Profession		Nationality
2					_			
3					_			
					_			
CONTACT DETAILS (Address is where travel documents will be forwarded to)								
Street				Apt #	City		Province	Postal code
Tel (home):		Tel (bus):	Fax:	e-mail:				
PRICING INFOR	MATION (ALL PRICING IN	(CANADIAN \$)		Client #1	#2	#3		TOTAL
(Enter the applicable price for each component for each passenger)								
1. CME & Cultural Tour of Bali								
	double occupancy) - Cdn							
Per person (double occupancy) - \$6,995 (if booked after Dec 9, 2019)					_			
Single supplement - \$1,600 (if you're travelling by yourself and in your own room) Single share fee - \$300 (if you're single and we find you a roommate)					_			
2 Academic program registration fee (\$750 per registrant)								
3 Supplementa	al taxes and fees (\$660 / p	person)						
4 Repeat Customer Discount (\$100/person if one previous tour, \$200 for two previous tours, (max) \$300 for three previous tours)								
(Payment must be by CHEQUE to qualify for this discount)					-			
Total amount prior to travel insurance (Note 1 below)								
Non-medical inclusive insurance package) Note 1								
All inclusive (including medical) insurance package)								
TOTAL INCLUDE	NO TRAVEL INCURANCE	•						
TOTAL INCLUDING TRAVEL INSURANCE								
PAYMENT INFORMATION DEPOSIT: \$500 per person plus insurance premium (both non-refundable) PAYABLE WITH REGISTRATION								
DEPOSIT: \$500 per person plus insurance premium (both non-refundable) PAYABLE WITH REGISTRATION BALANCE: Due by no later than Jan 20, 2020 (For registrations received on or after this date, payment is required in full at the time of booking)								
PAYMENT METHOD:								
Cheque:	Please enclose deposit cl	heque, together with a cheque	ue postdated to Jan 20, 20	20 payable to Doctors	on-Tour			
Credit card:	T 0.0							
	Type (Visa or Mastercard	, Amex not accepted) C	redit card #			Exp date		3 digit security code
	Name on card			Signature				
Your signature above duly authorizes Doctors-on-Tour to bill your credit card for the deposit, as well as to automatically charge your credit card with the balance due well as any additional chargeable items approved by you in writing (including by electronic mail)								ance due on jan 20, 2020 as
TERMS & CONDITIONS: My signature herein signifies my acceptance of the Terms & Conditions provided to me as part of the detailed information package regarding this tour and binds myself and all other tour participants listed on this Registration Form								
				Signature (Acc	Signature (Acceptance of Terms & Conditions)			
-	ewsletter updates - please s	send me future notifications	by e-mail	Yes / No	(Circle / highlig	ht one option)		
Notes We strongly recommend that you take out travel insurance for this trip. To calculate, and enter, your insurance premium, please select the premium per person (based on your age and "total amount prior to travel insurance") from the insurance tables in our brochure. If insurance is not purchased, passenger #1 must sign this section on behalf of all passengers Note: travel insurance above is only eligible for Canadian residents. Residents of other countries should organize their travel insurance needs through a local insurance provider.								
Insurance declined: (Signature - passenger #1)								
A valid passport expiring no earlier than 6 months after your scheduled departure date from Bali is mandatory for entry into Bali.								

Registration Forms should be mailed (if cheque payment) to Doctors-on-Tour, 20 Princeton Road, Toronto, On., M8X 2E2 or by fax, mail or e-mail (scan) (if credit card payment) to 1-888-612-1459 3. (fax), info@doctorsontour.ca (e-mail). For additional information, please call 416-231-8466, toll free 1-855-doc-tour (362-8687).