		de	octors-	n-tou	r.ca nd vacation concepts				
(	CDN\$ PRICING ! INCLUDING AIR FROM INCLUDING AIR FROM INCLUDING AIR FROM INCLUDING AIR FROM						REGISTER BY FEB 18, 2019 AND SAVE \$1,000 / COUPLE		
MAY 10 - 24, 2019 REGISTRATION / BOOKING FORM									
NAMES OF PAS (Title)					Birthdate (D/M/Y)		Academic prog Yes	ram reg? No	Special meal requirements (vegetarian etc)
1 2									
3									
IF YOU ARE INTERESTED IN MAKING A PRESENTATION, PLS LET US KNOW YOUR SUBJECT									
PASSPORT INF	Passport No.	Date of issue (D/M/Y)	Date of expiry (D/M/Y)	Place of	issue		Profession		Nationality
1			(5/11/1)		10000				
2 3				-					
CONTACT DETA	NLS	(Address is where travel doo	uments will be forwa	arded to)					
Charact					A-1.4	Otto		Province	Destal as de
Street					Apt #	City		Province	Postal code
Tel (home):		Tel (bus):	Fax:		e-mail:				
PRICING INFORMATION (ALL PRICING IN CANADIAN \$ INCLUDING FLIGHTS FROM TORONTO)					Client #1	#2	#3		TOTAL
(Enter the applicable price for each component for each passenger) 1. CME TOUR & CIRCUMNAVIGATION CRUISE OF ICELAND									
Per person (c	Per person (double occupancy - Category P cabin) - Cdn\$9,495 (if booked by Feb 18, 2019)								
	Per person (double occupancy - Category P cabin) - Cdn\$9,995 (if booked after Feb 18, 2019) Cabin upgrades on Ocean Diamond (base price includes Category P cabin) -								
Upgrade to	Category O cabin on Ocean	n Diamond - \$900 / person							
	Upgrade to Category D cabin on Ocean Diamond - \$1,950 / person Upgrade to Category A balcony suite on Ocean Diamond - \$5,800 / person								
Business clas	Business class supplement re international flights (\$2,000 / person)								Rate is subject to availability at time of booking
Single supplement - Pricing available uopn request Single share fee - \$300 (if you're single and we find you a roommate)						-			
2 Other									
Flights are also available from Edmonton and Vancouver - please note below if you require a flight from one of these two cities									(Enquire for costs)
City = 3 Academic program registration fee (\$700 per registrant)									
<ul> <li>Supplemental taxes and fees (\$715 / person)</li> </ul>									
5 Repeat Customer Discount (\$100/person if one previous tour, \$200 for two previous tours, (max) \$300 for three or more 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 INCLUDING TRAVEL INSURANCE									
CABINCLODING TRAVEL INSURANCE CABION SUBJECT Control C									
PAYMENT INFO DEPOSIT:	RMATION \$1,000 per person		plus insurance pr	emium	(both non-refun	dable)	PAYARI E WIT	H REGISTRATIO	DN .
DEPOSIT:	If you are upgrading to Bu	siness class an additional dep	osit representing the	amount of	the upgrade suppl	ement is required	I	II KEGISIKAIK	
BALANCE: PAYMENT METH	-	ary 25, 2019 (For registrations	received on or after	this date, p	ayment is required	a in full at the time	e of booking)		
Cheque:	Please enclose deposit ch	eque, together with a cheque	postdated to Januar	y 25, 2019	payable to Doctors	s-on-Tour			
Credit card:	Type (Visa or Mastercard,	Amex not accepted) Cre	dit card #				Exp date		3 digit security code
	Name on card				Signature				-
		authorizes Doctors-on- I our to geable items approved by you				automatically cha	irge your credit ca	rd with the baland	ce due on January 25, 2019 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									
CME Program Newsletter updates - please send me future notifications by e-mail					Signature (Acce	eptance of Terms (Circle / highlig)			
Civic Frogram Newseller updates - please send in ruture nonications by e-main Notes We strongly recommend that you take out travel insurance for this trip. To calculate, and enter, your ins 1. travel insurance? from the insurance tables in our brochure. If insurance is not purchased, passenger # Note: travel insurance above is only eligible for Canadian residents. Residents of other countries should					surance premium, 1 must sign this se	please select the ection on behalf o	premium per pers f all passengers		
Insurance de	clined:			(Signatur	e - passenger #1)				
<ol> <li>Valid Passports which must have an expiry date no earlier than 3 monthsafter the date of your scheduled departure from Iceland. A tourist entry visa is not required for entry into Iceland</li> </ol>									
Registration F	Forms should be mailed (if c	we are subject to confirmation heque payment) to Doctors-or	n-Tour, 20 Princeton	Road, Toro	onto, On., M8X 2E	2 or by fax, mail o	or e-mail (scan) (if	credit card paym	nent) to 1-888-612-1459 (fax),
<ol><li>info@doctors</li></ol>	ontour.ca (e-mail) . For addi	itional information, please call	416-231-8466, toll fr	ee 1-855-d	oc-tour (362-8687	).			