		c	doctors- On-tou	r.ca nd vacation concepts				
INCL	IADIAN \$!! .UDING AIR # TORONTO	CME, CULTURAL & SAFARI TOUR OF S MAR 25 - APR 9, 2022 REGISTRATION / BOOKING F				REGISTER BY DEC 6, 2021 AND SAVE \$1,000 / COUPLE		
		(OPTIC	ONAL VICTORIA FALLS	EXTENSIO	-			
DID YOU KNO	OW? - ONLINE REGISTR	ATION FOR THIS PROGRA	M IS ALSO NOW AVAILABLE A	Τ>	https://fs22.fon	msite.com/Doctor	sontour/SAF220	3RegistrationForm/index.html
NAMES OF PASS (Title)	SENGERS First name	(EXACTLY AS THEY APP Middle name	PEAR ON YOUR PASSPORT) Last name	Birthdate (D/M/	Y)	Academic prog Yes	ram reg? No	Special meal requirements (vegetarian etc)
2								
3								
IF YOU ARE INTE PASSPORT INFO		PRESENTATION, PLS LET	US KNOW YOUR SUBJECT					
	Passport No.	Date of issue	Date of expiry Place of	issue		Profession		Nationality
1 2								
3								
CONTACT DETAI	ILS	(Address is where travel d	locuments will be forwarded to)					
Street				Apt #	City		Province	Postal code
Tel (home):		Tel (bus):	Fax:		e-mail:			
PRICING INFORMATION (ALL PRICING IN CANADIAN \$) Client #1 #2 #3 TOTAL (Enter the applicable price for each component for each passenger)								TOTAL
1. CME, Cultural & Safari Tour South Africa Per person (double occupancy) - \$8.495 (if booked by Dec 6, 2021)								
		5 (if booked after Dec 6, 202						
Premium Eco	nomy class air supplemen	nt - \$1,700						Rate is subject to availability at time of booking
Business clas					Rate is subject to availability at time of booking			
Single supplement - \$1,980 (if you're travelling by yourself and in your own room)								
2 Other	ee - \$300 (if you're single	and we find you a roommate	e)					
	ghts also available from M ginating city here	ontreal, Calgary, Edmonton,	Winnipeg and Vancouver (supple	ement applies)				
3 Academic program registration fee (\$800 per registrant)								
4 Supplemental taxes and fees (\$665 / person)								
5 Extension - Victoria Falls (3 days) - \$2,105 / person (double occupancy, inc taxes) Single supplement for Victoria Falls extension (\$485)								
	omer Discount (\$100/per \$300 for three previous t	200 for two previous						
(Payment must be by CHEQUE to qualify for this discount) Total amount prior to travel insurance (Note 1 below)								
	isive insurance package		Note 1					
	iding medical) insurance p							
Premium Protection	on Plan insurance coverag	ge)						
TOTAL INCLUDI	NG TRAVEL INSURANCE							
PAYMENT INFOR DEPOSIT: BALANCE: PAYMENT METH	\$500 per person (\$700 Due by no later than Dec	if taking Vic Falls extension) eember 20, 2021 (For registra	plus insurance premium ations received on or after this dat	(both non-refur te, payment is requ		PAYABLE WIT time of booking)	H REGISTRATI	ON
Cheque:	Please enclose deposit c	cheque, together with a cheq	ue postdated to December 20, 20	021 payable to Doo	ctors-on-Tour			
Credit card:	Type (Visa or Mastercard	d, Amex not accepted) C	redit card #			Exp date		3 digit security code
	Name on card			Signature				_
			ur to bill your credit card for the de by you in writing (including by ele		automatically cl	harge your credit	card with the ba	lance due on December 20, 2021
TERMS & CONDITIONS: My signature herein signifies my acceptance of the Terms & Conditions provided to me as part of the detailed information package (and also available at www.doctorsontour.ca/terms-and-conditions.php) regarding this tour and binds myself and all other tour participants listed on this Registration Form				Signature (Acceptance of Terms & Conditions)				
LAIBILITY WAIVER: My signature herein signifies my acceptance of the Release of Liability Walver				Signature (Acci	eptance of Terms	s & Conditions)		
regarding this tour								
mysen and all oth	ner tour participants listed	on unis registration Form		Signature (Acc	eptance of Relea	se of Liability Wa	iver)	-
CME Program Newsletter updates - please send me future notifications by e-mail Notes				Yes / No	(Circle / highlig	ht one option)		
1. to travel insura	ance") from the insurance	tables in our brochure. If ins	rip. To calculate, and enter, your in surance is not purchased, passeng Residents of other countries shou	ger #1 must sign ti	his section on be	half of all passeng	gers	n your age and "total amount prior provider.
If taking the o	ts (expiring no earlier than ptional Victoria Falls (Zam	nbia) extension, Canadian cit	(Signatu ed departure date from South Afrii izens require an entry visa and y estimate and are subject to confir	our passport mus	for entry into So t be valid for a m	inimum of 6 mon	ths from the dat	

- 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 (fax), info@doctorsontour.ca (e-mail) . For additional information, please call 416-231-8466, toll free 1-855-doc-tour (362-8687).