

ABRUZZO CIBUS -- TOUR RESERVATION FORM

To register, fill out, print, sign, scan, and send this form by email to info@abruzzocibus.com. All of the following information must be completed in order to hold your place in the tour.

A non-refundable deposit of 300 EURO is due upon our receipt of this registration form. If paying by credit card, this amount will be charged to your card by Abruzzo Cibus. If you are paying with another form of payment, your registration form will not be considered as valid until the 300 EURO deposit has been received and cleared.

PLEASE USE ONE FORM PER GUEST. If you are registering more than one guest, be sure that the signature on the registration form is that of the person responsible for the payment.

Full Legal Name (as on passport):			
Phone number/s:		Email address:	
Billing address (same as address on file for credit card)			

TRAVEL INFORMATION (airline info can be sent separately if necessary)

Which tour are you registering for? (choose one)

- | | | |
|--|---|---|
| <input type="checkbox"/> ABRUZZO COOKING IN CARUNCHIO | <input type="checkbox"/> MEDIEVAL ADRIATIC EXPERIENCE IN TERMOLI | <input type="checkbox"/> WELLNESS & CULINARY ADVENTURE IN CARAMANICO |
|--|---|---|

Tour start date **	Tour end date**
Emergency contact (name, ph. #, email)	
Airport of origin:	Airport of arr/dep in Italy:
Name of airline/arrival & departure times and dates:	

** These are the dates that have been agreed upon through email correspondence with Abruzzo Cibus.

PAYMENT INFORMATION (choose one)

<input type="checkbox"/> Credit card (Visa or Mastercard)	Card number	EXP:		
	Issuing bank			
<input type="checkbox"/> I have made arrangements with Abruzzo Cibus for another form of payment				

ROOM AND BOARD REQUIREMENTS AND PREFERENCES

ROOM REQUIREMENTS (choose one)	<input type="checkbox"/>	I need a single occupancy room (50 Euro supplement per night)
	<input type="checkbox"/>	I will share a double room (one double bed) with <u>(name) _____</u>
	<input type="checkbox"/>	I will share a double room (two single beds) with <u>(name) _____</u>
<input type="checkbox"/> I am interested in a room UPGRADE (300 euro supplement per week)		
OTHER (Please specify other special requests here, such as dietary or mobility restrictions)		

YOUR SIGNATURE CONFIRMS THE FOLLOWING:

I understand that the rest of the tour price will be charged to my credit card/or must be paid as much as 60 days prior to my tour start date, and at the latest, on the tour start date.

I have read and accept the terms and conditions which are clearly described on the following web page: <https://www.abruzzocibus.com/application-form>. I agree with the pricing that has been outlined for me in email correspondence. Before booking my travel, I have received confirmation of the availability of the hotel and cooking course I have selected.

Signature: _____

Date: _____ / _____ / _____
day month year