**TOUR REGISTRATION FORM**

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| **TOUR DETAILS [for Silver Horizon Travel Co-op Use]** | | | | | |
| **Name of Tour:**  **PAI,THAILAND** | | **Date(s) of Tour***: [dd/mm/yyyy]*  **11th to 16th January 2024** | | | |
| **This tour is organized in conjunction with:** *[Tour Agent/Operator]*  **ISE TRAVEL LTD** | | | | | |
| **Tour Fee:**  **Member -**  **$ 1,680.00 (twin-sharing);**  **$1,920 .00 (Single)**  **Non-Member-**  **$ 1,760.00(twin-sharing)**  **$2,000.00 (Single)** | | | | **Deposit:** *[Required for confirmation of booking****]***  **$ 800.00** | |
| Tour itinerary, flight(s), accommodation, closing date, and other details, see SHTCL website www.silverhorizontravel.com. | | | | | |
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| **PERSONAL PARTICULARS** | | | | | |
| **Salutation:**  Mr Mrs  Ms  Others \_\_\_\_\_\_\_\_\_\_\_ | | | **Member of Silver Horizon Travel Co-op:**  No  Yes *(Pls provide no.)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Name (as in Passport):** *[Underline Surname]* | | | **Passport Number:** | | |
| **Nationality:**  Singapore/PR  Others *(Pls specify)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **Passport Expiry Date:** *[dd/mm/yyyy]* | | |
| **Address:** | | | **Date of Birth:** *[dd/mm/yyyy]* | | |
| **Contact Details:**  Mobile: Home: | | | **Email:** | | |
| **My Preferences:** *[Note we will try to cater but no guarantees]*  Dietary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Rooming/Flight seating: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **I would like to share room with:** *[Full name]* | | |
| **EMERGENCY CONTACT** | | | | | |
| **Name:** | **Relationship:** | | | | **Contact No:** |

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Description automatically generated**

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| **PAYMENT DETAILS** |  |
| If payment is by internet bank transfer, please credit the respective amount above to OCBC Bank a/c**: 641-444-799-001.** You can also use your bank mobile app to scan the **QR code** on right or enter **UEN No. T12CS0001H** to pay*.* Please indicate your name in the transaction reference or contact Dr. Shirley Wan (mobile: 88698980); email: ([tour@silverhorizontravel.com](mailto:tour@silverhorizontravel.com)) with details of your transaction. |
| If payment is by cheque, please make cheque payable to: **Silver Horizon Travel Co-operative Ltd**.  If you are dropping the cheque off into the OCBC Quick Cheque Deposit box, do also write our account no (**641-444-799-001**) at the back of the cheque and contact Dr. Shirley Wan (mobile: 88698980); email: ([tour@silverhorizontravel.com](mailto:tour@silverhorizontravel.com)) bank, cheque no and date of deposit. | |

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| **TERMS & CONDITIONS** |
| **Tour Terms & Conditions (T&C):**   1. Silver Horizon Travel Co-operative Ltd (SHTCL) acts as the Tour Co-organizer with the Tour Agent/Operator and will render assistance to all participants, where possible. SHTCL will be responsible for fee collection, transaction, and communication with you. SHTCL will appoint at least one Tour Coordinator to liaise with and look after you for the tour. All queries or correspondence, therefore, should be made to the SHTCL Tour Coordinator. 2. The Tour Agent/Operator may have its own independent T&C (such as relating to programme changes, cancellation charges and refunds). Note that they also form part of SHTCL’s overall T&C. Where provided, they will be extended to you. 3. All tour bookings will be on a first come first served basis. The payment is, therefore, required to hold your booking (reservation) on a confirmed basis. 4. All group tours are subject to a minimum and maximum group size (as determined by SHTCL) which must be met in order for the tour to be confirmed and departure to be finalized. Bookings received beyond the maximum size will be placed on a waiting list to replace any withdrawals. 5. You undertake to purchase personal travel insurance and/or to be vaccinated against known diseases, where necessary, for your own protection in the region(s) of this tour. |
| **Indemnity:**  You will indemnify SHTCL, its Tour Agent/Operator, staff, employees, and vendors against any claim for your medical condition, injury, accident, delay, or loss of personal properties suffered during the tour, or any other irregularity arising from or in connection with, whether directly or indirectly, this tour as a result of circumstances beyond its control (including but not limited to the following):   1. Mechanical breakdown, inclement weather, government action, industrial action, political unrest, force majeure, compulsory quarantine, acts of God, etc. 2. Your failure to obtain proper documentation (including required visas) and to follow reasonable instructions (such as conducting your own independent activities without consent) during the tour. |
| **SHTCL Personal Data Protection Policy:**   1. By submitting information to or signing up on this form, or participating in this tour, you consent to SHTCL collecting, using, disclosing & sharing of your personal data, for the purpose of our administration & communication of our services, programmes & any other purpose that is reasonably related to this tour. SHTCL respects personal data and privacy, and will not share such information with any third parties unless authorized to do so. 2. if you have any queries, kindly contact us by email at [tour@silverhorizontravel.com](mailto:tour@silverhorizontravel.com), or write to us at the mailing address: C/o Dr Shirley Wan, 9 Dairy Farm Heights #04-23, The Skywoods, Singapore 677670. |

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| **AGREEMENT & FORM SUBMISSION** | |
| By signing on this registration form, I hereby agree to the above Terms & Conditions. | |
| **Applicant Signature:** | **Date:** |
| Please complete and submit the signed form either through email at [tour@silverhorizontravel.com](mailto:tour@silverhorizontravel.com) print out, complete and post together with cheque to: C/o Dr. Shirley Wan, 9 Dairy Farm Heights #04-23, The Skywoods, Singapore 677670. Her contact No. 8869 8980. If you are paying by online bank transfer or dropping the cheque off at the Quick Cheque Deposit box, please note instructions under **Payment Details**. | |

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| **For SHTCL Use** | Bank/Cheque No. &/or Transaction Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |