

# COMFORTABLE HIKING HOLIDAYS RESERVATION FORM

**DESTINATION** \_\_\_\_\_

**NUMBER OF SPOTS TO BE RESERVED** \_\_\_\_\_

land only       land plus group airfare

**NAME(S) AS THEY APPEAR ON YOUR PASSPORT**

\_\_\_\_\_  
\_\_\_\_\_

**ADDRESS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PHONE**

Home: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

**COMPLETE AS APPLICABLE**

- I would like a single room (kindly call C.H.H. to enquire about cost of single supplement)  
 I would like to share a room with someone of the same sex.  
 Special dietary requirements (please specify \_\_\_\_\_)

**INSURANCE**

- Yes, please contact me concerning the various insurance options/rates for my trip. Please provide your date of birth \_\_\_\_\_  
 I hereby decline any trip insurance offered by Comfortable Hiking Holidays.

It is customary for Comfortable Hiking Holidays to share the names, addresses and phone numbers of its guests with other members travelling on the same trip. Please check this box if you give us permission to share this information with other people on the same trip as you.

Additional remarks

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I enclose deposit/full payment of \$ \_\_\_\_\_

Please make cheques payable to COMFORTABLE HIKING HOLIDAYS.

If you are paying by credit card, kindly complete the information below.

Visa     Mastercard     Amex

Card no. \_\_\_\_\_

Expiry date \_\_\_\_\_

3-digit security code on the back of your card \_\_\_\_\_

Cardholder name \_\_\_\_\_

Signature \_\_\_\_\_

Mail deposit and reservation form to:

**Maddalena Molino**  
**Comfortable Hiking Holidays Ltd.**  
**1200 Sheppard Ave. East**  
**Suite 201**  
**Toronto, ON M2K 2S5**  
**Canada**

**Direct Tel: (416) 445-2628**

**Fax: (647) 439-2628**

**Email: [info@letshike.com](mailto:info@letshike.com)**

**[www.letshike.com](http://www.letshike.com)**

I have read and agree with the TERMS & CONDITIONS set forth above.

(Signature, Guest 1) \_\_\_\_\_

(Signature, Guest 2) \_\_\_\_\_