

**PRIMA LUCE TOURS & SAFARIS**

2000/076229/23

P.O. BOX 2518 CRAMERVIEW 2060

Tel:+27(0)11 704 2199

Fax:+27(0)86 606 6940

Email: [info@primalucetours.com](mailto:info@primalucetours.com)

Website: [www.primalucetours.com](http://www.primalucetours.com)

**INDEMNITY FORM**

(MUST BE READ IN CONJUNCTION WITH THE TERMS AND CONDITIONS OF PRIMA LUCE TOURS & SAFARIS ('The Operator'), A COPY OF WHICH APPEARS ON THE REVERSE HEREOF)

Please complete the following form and fax back to 'The Operator' before your documents are released to you.

I \_\_\_\_\_ hereby acknowledge that my consultant has advised me about the following and that I have read and understand this Indemnity and agree to be bound by it.

**INSURANCE**

I hereby accept / decline travel insurance. I am aware of the risk of not accepting travel insurance and that the insurance offered by credit card companies may be inadequate.

I hold harmless and indemnify 'The Operator' and/or its directors and/or employees and/or suppliers against any consequences of not having/having inadequate travel insurance, including (without limiting the generality of the foregoing) any loss, damage, illness, injury or death or due to any travel arrangements having to be changed, amended or cancelled and/or legal costs (on an attorney and own client scale) that 'The Operator' (or any of the other parties indemnified herein) may incur.

I am aware of and have read the **Terms and Conditions** of The Operator'.

**VISA AND PASSPORT REQUIREMENTS**

I have been advised by 'The Operator' as to the Visa requirements and approximate costs pertaining to this itinerary.

Please be advised that visas can only be obtained by 'The Operator' if 'The Operator' is specifically requested to do so and if the passport and air ticket are in the same name, and that children travelling with one parent have a certified letter authorizing them to travel without the other parent. Original birth and marriage or death certificates will be required.

**on my behalf (s)necessary visa to obtain the 'The Operator'I hereby instruct** and I accept all costs and disbursements pertaining thereto. (Delete if not applicable(

**I do not require assistance in obtaining any visas for the following reason(s):(**

- 1] I have an entry visa valid until \_\_\_\_\_ (date). (Copy attached).
- 2] I travel on a \_\_\_\_\_ passport and therefore do not require a visa.
- 3] \_\_\_\_\_ (other)
- 4] I am obtaining my own visa and will not hold "The Operator" liable in the event of my not obtaining the visa on time to travel / or any other problem arising from my own application for the visa(s). The aforementioned will also apply if I request 'The Operator' to apply for a visa on my behalf.
- 5] I am obtaining a visa upon arrival at my destination.

I am aware of and have read the **Terms and Conditions** of 'The Operator'

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### HEALTH REQUIREMENTS

Please be advised that you should contact your nearest Travel Clinic for the relevant and current requirements and information pertaining to your trip.

It is your responsibility and yours alone to ensure that you have complied with any health requirements for your trip. This includes health certificates, inoculation and vaccination certificates. It is your duty to enquire from 'The Operator' and the relevant consulate or embassy what the applicable health requirements are and to obtain such documentation and/or treatment timeously. 'The Operator' will assist you as far as it can, but under no circumstances can 'The Operator' be held responsible for any request for a health certificate being declined, for your entry into any country being refused or for any consequence of any nature arising from your failure to ensure that you have complied with the aforementioned.

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### VERY IMPORTANT: PLEASE NOTE RE SIGNATURE

- If you are **under the age of 21**, your parent(s) or guardian(s) must co-sign this Form.
- If you represent or make a booking on behalf of **a group**, you must provide us with a written mandate authorising you to make the booking and sign this Indemnity Form on behalf of each of the members constituting the group or each member constituting the group must be given a copy of 'the Operator's Terms and Conditions and must sign this indemnity form.
- If you represent or make a booking on behalf of **another person or legal entity**, you must provide us with a written mandate/resolution authorising you to make the booking and sign this Indemnity Form on behalf of the person or legal entity or such person must be given a copy of of 'the Operator's Terms and Conditions and must sign this Indemnity Form.
- **Failure to comply with the above will result in the travel documents not being released and/or all bookings being cancelled.**

*All business is conducted in accordance with our Terms and Conditions, the full text of which is available at [www.primalucetours.com](http://www.primalucetours.com) or on request from our offices. All clients doing business with PRIMA LUCE TOURS & SAFARIS will be deemed to have read and accepted to be bound by our Terms and Conditions.*

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Client signature

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Client Name