Name (as it appears on the passport you are using):	
Nationality (as it appears on pass	ort):
Passport number:	Date of issue:/ Expiry date:/
Occupation:	Date of birth:/
Residential address:	
Suburb:	Postcode: Country:
Email:	Mobile number: + ()
Do you have any pre-existing med	cal conditions? Yes No
If yes, please describe:	
Emergency contact name:	Relationship:
Emergency contact mobile numb	r: + ()
Room type preferred: Twin Sh	are Single
I want to share a room with (name	:
I have read and agree to the	erms and conditions as detailed on the Francesca Muir website
I have attached a scan/copy	of my passport details page. I understand my passport MUST be valid for six
months from expiry date, and cor	ain at least three blank pages.
Signature:	Date:/

Tour Information

Tour name: Greek Easter Tour to Crete - 15 to 28 April 2025

Booking Code: Greek Easter **Length of Tour**: 13 nights/14 days

Destination: Crete, Greece

Dates: Tour starts Tuesday 15 April, 2025 at Heraklion Airport, Crete, Greece | Tour ends Monday 28 April,

2025 in Chania, Crete, Greece

Cost: Twin/Double Share & Single A\$8700 pp | Excludes insurances, international and internal flights, which

you are required to arrange and book separately

Payment details

Deposit: A\$900 pp non-refundable deposit by 19 July, 2024 is essential to secure your booking. **First payment**: A\$3900 by 1 October 2024, **Final payment**: A\$3900 by 20 January 2025

Bank name and address

St. George Bank Australia 4-16 Montgomery Street, Kogarah NSW 2217

Account name: Francesca V Muir | BSB: 112-879 | Account number: 410499385

Swift Code: (BIC): SGBLAU2S

Please email payment receipt to francesca@francescamuir.com