

REGISTRATION FORM

Please complete a copy of this form for each person registering and return with your deposit to:

XXXX or,

Fax to: or Telephone: (if you have any queries) **or Scan & Email to: XXXX**

Photo Safari _____ Departure Date _____

Do you wish to book the optional Extension? (Please tick) No Yes
(Only if applicable to this photo safari)

PERSONAL DETAILS:

Name _____ (Please print name clearly) (exactly as it appears in your passport)

Date of Birth _____ Nationality _____
(Day /Month / Year)

Male Female

Name of Spouse/Partner travelling with you _____ (if applicable)

Name for Participant List &/or Name Badge _____

Street Address _____

City _____ State _____ Country _____ Post Code _____

Home Phone _____ Work Phone _____

Fax _____ Mobile Phone _____

Email _____ If you prefer to receive documents by email, please tick

I confirm I hold the mandatory type of travel insurance when paying the first deposit (Please tick)

I confirm I have read and understand the section headed, "*Health Considerations*" in the accompanying document "*Detailed Itinerary and Other Important Information*". (Please tick)

Signature _____ Date _____

Please continue to the Page 2

PASSPORT DETAILS (for international travel only; a photocopy of the photo page in your passport is required):

Passport Number _____ Place of Issue _____

Issue Date _____ Expiry Date _____ Nationality _____
(Day/month/year)

EMERGENCY CONTACT DETAILS

Name _____ Relationship to You _____
(Please print name clearly)

Address _____

Home Phone _____ Work Phone _____ Mobile _____

Email _____

DEPOSIT PAYMENT DETAILS:

Direct deposit facilities are available and details may be obtained from XXXX

Deposit \$ _____ Credit Card Number _____
Visa Card MasterCard Other (please tick)

Name on Card _____ Security Code _____
(Please print name clearly)

Expiry Date _____ Credit Card Authorization Signature _____
(As it appears on card)

If the billing address for this card differs from the address you provided on Page 1, please enter it below:

Signature _____ Date _____

**Confirmation of your reservation will be forwarded to you by XXXX upon receipt of the deposit.
Please note, reservations will be accepted strictly in the order received.**

Please continue to Page 3

TERMS AND PROVISIONS OF REGISTRATION

I am aware that during any photo safari, trip or tour arranged by Iconic Images International that I am participating in certain risks and dangers particularly while traveling in wilderness areas. These risks and dangers include the possibility of property loss or damage, personal injury and death.

I further acknowledge that:

- i. there is a possibility of accident or illness occurring in places without access to immediate or timely medical treatment or facilities, and
- ii. there is a risk of tropical or other diseases, food-related illnesses, the potential for personal injury and property damage or delay by forces of nature, wildlife, quarantine, political instability, terrorism, strikes, government restrictions or change of regulations, theft, pilferage, and accidents during travel on foot or by aircraft, train, motor vehicle, four-wheel drive, boat, ship or other conveyance.

I acknowledge that such risks cannot be eliminated without jeopardizing the essential qualities of the safari, trip or tour. Accordingly, in consideration of, and as part payment for the right to participate in such trips, tours and/or other activities and services arranged for me by Iconic Images International, I hereby assume all such risks, and to the fullest extent permitted by law I hereby release Iconic Images International, its officers, employees, and agents from any and all liability, actions, causes of actions, claims, and demands of every kind and nature, howsoever caused, which I now have or which may arise out of, or in connection with, such safaris, trips or tours and participation in any activities arranged for me by Iconic Images International.

These terms and provisions serve as a release and assumption of risk by me, my heirs, executors and administrators.

I acknowledge that any contract between me and Iconic Images International or its agents arising out of this registration will be governed by the law of the State of Western Australia and I submit to the exclusive jurisdiction of the courts of that State.

I have read and agree to the conditions outlined in the other written material pertaining to my safari/trip/tour, including (but not limited to) the sections on insurances, cancellations, refunds, limitations on responsibility and liability.

By signing this document, I acknowledge that I am waiving (to the fullest extent permitted by law) all claims (whether in contract or tort, under statute, or otherwise) that I might, but for such waiver, have had against Iconic Images International or its officers, employees or agents in respect of any loss or injury sustained by me as a result, directly or indirectly, of registering for and/or participating in this safari/trip/tour.

I have read this entire document (3 pages), I understand it, and I agree to be bound by its contents.

Name _____
(Please print clearly, using capital letters)

Signature _____

Date _____

When you have completely reviewed and signed this Registration Form, please:

Mail to: XXXX