

As You Like It Safaris, Inc. - Photographic Wildlife Safari

September 6-22, 2017

Safari Registration Form

(Contact: Vivien Prince at vivprince@asyoulikeitsafaris.com, 702-343-3776)

Please fill out form below and mail it to 5855 N. Kolb Rd, #12209, Tucson, AZ 85750, with your \$2,000 per person deposit (check made out to Vivien Prince, As You Like It Ac). Deposit is due November 15, 2016, or upon sign up after this date. A second payment of half the balance of the Safari is due February 15, 2017, and the balance must be paid by June 15, 2017. A separate invoice will be sent to you for these payments.

Passenger #1

Name (exactly as shown on passport) _____

Passport Number: _____ Exp Date: _____

Date of Birth: _____ E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Passenger #2

Name (exactly as shown on passport) _____

Passport Number: _____ Exp Date: _____

Date of Birth: _____ E-mail: _____

Please use separate page if there are more passengers at same address.

Please include copy of passport(s) when returning this form.

For flight arrangements (optional)

SEAT PREFERENCE: Aisle _____ Window _____ Next to: _____

NOTE: If airplane does not have a two-seat (AB) configuration, and you and your companion have chosen an aisle and window, respectively, be aware that you may have a stranger between you and your traveling companion.

PRICE

Kenya, The Full Main Safari

US\$8,900* per person sharing

Single Supplement: US\$1500

Kenya, The Safari without Amboseli

US\$7,900* per person sharing

Single Supplement: US\$1500

* - Based on 24 passengers, and 4 per vehicle

- Students will receive a discount TBD

I (We) choose

_____ Full Main Safari

_____ Safari without Amboseli

_____ I am a Student and a copy of my ID is enclosed. NOTE: Student ID is required to qualify.

_____ I am a Single

_____ Please match me with a roommate (NOTE: We will do our best; however, if a roommate cannot be found, you will be responsible for the Single Supplement amount associated with the Safari you have chosen.)

_____ I wish to have a room of my own and am willing to pay the Single Supplement

I (We) have read and agree to the Terms and Conditions of this Safari, and have enclosed the \$2,000 (non-refundable) Deposit for each passenger. In addition, the Insurance form has been sent to Drifter Sister for a quote, so that we can purchase the mandatory travel insurance for this trip.

Signature (Passenger #1)

Date

Signature (Passenger #2)

Date

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Terms and Conditions

PAYMENT AND CANCELLATION PROCEDURES

1. Safari Confirmation

Receipt of a non-refundable deposit of **US\$2,000** per person **confirms** your dates.

Please Note: The balance must be paid according to the following payment schedule.

November 15, 2016 \$2,000 non-refundable Deposit

February 17, 2017 Half the balance of the Safari

June 15, 2017 Balance is due

2. Cancellations (Notice of Cancellation required in writing)

a. If such notice is received **30-60 days** prior, **50% of full Safari cost is forfeited.**

b. If such notice is received **less than 30 days** before, the full cost of the Safari is forfeited.

INSURANCE

Travel insurance is mandatory for this Safari. With the uncertainties of today's world, you want to be covered for any and every eventuality, no matter what the cause. It is suggested to purchase this insurance from Ihla Crowley of Drifter Sister LLC. A form is included for this purpose, and should be scanned and sent as an attachment to an email to ihla@driftersister.com, or mailed to Drifter Sister LLC, P.O. Box 60042, Boulder City, NV 89006.

Note: If you choose not to go through Drifter Sister for your travel insurance, you must initial the disclaimer below, and send a copy of the policy purchased from the travel insurance company you have chosen, and its coverage, to Vivien Prince, **5855 N. Kolb Rd, #12209, Tucson, AZ 85750.**

_____ I have purchased Travel Insurance elsewhere, and a copy of my policy and coverage is included. I hold As You Like It Safaris, Inc. blameless for any consequence of this action.

RATES

Our prices include only what is mentioned in each itinerary. These rates are based on tariffs and other costs prevailing at the time of printing and are subject to change without prior notice.

ALTERATION OF TOURS

The company reserves the right to alter the route or cancel the operation of any scheduled tour should conditions so necessitate. We reserve the right to decline to accept or retain any client as a member of any tour at any given time should conditions so necessitate.

LIABILITY

The company and its agents act only as agents of the passengers in all matters relating to hotels/lodges and tented camp accommodation, tour and transport, and shall not be liable for injury, delay, loss or damage in any manner.

FLIGHT ARRANGEMENTS

Please note that whether AYLIS assists with your flight arrangements, or if you make your own arrangements, AYLIS is not responsible for a refund of any airfare.

EMERGENCY CONTACT & MEDICAL INFORMATION

Name of Contact _____ Relationship _____

Phone Number _____ Email _____

Please describe any dietary requirements/allergies, or medical conditions that we should be aware of:

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Insurance Information and Registration Form

(Contact: Ihla Crowley at ihla@driftersister.com, 702-294-4365)

BASIC PLAN

Coverage*:
Medical Expense: \$10,000
Emergency Evacuation/Repatriation
of Remains: \$100,000

<u>Age</u>	<u>Premium</u>
0-34	\$233
35-59	\$362
60-69	\$460
70-74	\$560
75-79	\$734
80-84	\$981
85+	\$1,217

SILVER PLAN

Coverage*:
Medical Expense: \$15,000
Emergency Evacuation/Repatriation
of Remains: \$150,000

<u>Age</u>	<u>Premium</u>
0-34	\$322
35-59	\$488
60-69	\$674
70-74	\$822
75-79	\$1,033
80-84	\$1,357
85+	\$1,774

GOLD PLAN

Coverage*:
Medical Expense: \$25,000
Emergency Evacuation/Repatriation
of Remains: \$500,000

<u>Age</u>	<u>Premium</u>
0-34	\$335
35-59	\$518
60-69	\$700
70-74	\$889
75-79	\$1,094
80-84	\$1,447
85+	\$1,958

This chart is for planning purposes only.

Premiums are per/person.

It reflects premium for Trip Cost of \$8,900. Airfare is not included. Your actual trip cost will be higher if you are a single, or add airfare later. It will be lower if you choose not to do Amboseli. Thus your premium for the insurance could be higher or lower, and may vary state by state.

A quote will be provided prior to purchasing the insurance.

*In addition to the Medical Coverage, all plans include 100% Trip Cancellation and 100% Trip Interruption, plus Trip Delay, Baggage & Personal Effects Loss, and Baggage Delay. Also included are 24-hour Travel Assistance and Concierge Services that will be explained in the Coverage Statement you will receive upon sign-up.

In addition to the premium, there is a service fee of \$7 per policy

DO NOT include insurance payment with your trip deposit. It will be paid separately, after you receive the quote. Upon approval, Drifter Sister will input the policy, using the credit card information furnished below.

ENROLLMENT FORM:

I (We) choose: _____ Basic Plan _____ Silver Plan _____ Gold Plan

_____ I will be traveling as a single, paying Single Supplement

_____ I (We) are not doing Amboseli

If you have children traveling with you or have pre-existing medical conditions**, it is imperative you choose Silver or Gold, and the policy is submitted within 15 days of the date of your deposit.

Insured #1

Full Name with middle initial: _____

Date of Birth: _____ E-mail Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Insured #2 (two people can be on same policy if living at same address)

Full Name with middle initial: _____

Date of Birth: _____

Payment will be made, after quote provided is approved, using the credit card info below.

American Express Master Card Visa Discover

Card Number: _____ Exp Date: _____ CCV: _____

Name of Card Holder: _____

Signature: _____

*A medical condition treated within the previous 180 days which, if it were to re-occur, might cause you to cancel the trip.