



DARJEELING 2019

BOOKING FORM

SURNAME: as written on your passport FORENAME(S): as written on your passport GENDER (M/F):

DATE OF BIRTH: DD / M M / YY PASSPORT N° :

DATE OF ISSUE: DD / M M / YY DATE OF EXPIRY: DD / M M / YY

NATIONALITY: PROFESSION:

ADDRESS:

TOWN: POST CODE: COUNTRY:

TEL: E-MAIL:

ROOM TYPE

(Please tick ✓ type of room required)

SINGLE ROOM (OPTION 1) _____

DOUBLE ROOM (OPTION 2) _____ Name of your roommate (if known):

ARRIVAL AND DEPARTURE DETAILS*

DATE OF ARRIVAL IN DELHI:

TIME OF ARRIVAL:

AIRLINE:

FLIGHT NO. :

DATE OF DEPARTURE FROM DELHI:

TIME OF DEPARTURE:

AIRLINE:

FLIGHT NO. :

*NB: Please make sure that you have subscribed to the compulsory Repatriation Insurance.

PEL DRUKPAY TCHEUTSOK

"DARJEELING 2019"

Bel Avenir

56770 PLOURAY

Tel: 0033 6 58 94 56 79

e-mail: darjeeling2019@orange.fr

website: www.drukpa.eu