

Order Form

Holiday packages



Packages	Finish of the rally	Rest day
Price/Pers.	2 550 €	2 050 €
Number Pers.		
Total in Euros		

Participants



Name	First	Phone	Fax	E-mail

I the undersigned, _____

acting for myself and on behalf of any other persons entered on the present bulletin, certify having read and understood the specific and general conditions of the sale of the voyage and have received the estimate, travel cancellation insurance documents (if requested), proposition which constitutes the prior information conforming to article 96 of decree n° 94490 of June 15, 1994.

In case of a conflict of interpretation between the details of the estimate, propositions and those of the present contract the contents of the estimate proposition prevail.

Place _____

Date _____

Signature preceded by « read and approved »

Name: _____

Invoice address: _____

Medical repatriation Insurance: operated by Mutuaide Assistance (policy n° F05/323). Health repatriation and medical transport, obtaining of medicines, reimbursement of medical expenses, surgery and hospitalization abroad with a minimum ceiling of 1500 € inclusive of taxes, repatriation of body in case of death, transmission of urgent messages. Third party professional Insurance: Company "GAN EURODCOURTAGE IARD". Material and corporeal damage, immaterial assets, guaranteed up to 7 622 451 €, contract n° 86 111 561. Financial Guarantee: A.P.S 6 rue Villaret de Joyeuse - 75017 PARIS - Amount: 182 928 €.