

Booking Form



Name of tour _____

Travel dates _____

I hereby make a binding booking for _____ persons for the above-mentioned journey.

Last Name*

First Name(s)*

Date of birth

Nationality

* According to the identification document used on the journey, subsequent changes are only possible for a fee

1. _____

2. _____

Invoice address

1. _____
Street Postcode / City Company (if applicable) Tax ID (if company)

Phone number E-Mail Mobile phone**

2. _____
Street (if different from 1) Postcode / City Company (if applicable) Tax ID (if company)

Phone number E-Mail Mobile phone**

** Strongly recommended as a contact in the event of short-term changes

Double occupancy Single occupancy Category Hotel/Ship/Train (if selectable) _____

Ticket category (concerts etc. if selectable) _____

Arrival self organised Flight (if bookable) Train (if bookable) 1st class 2nd class

From/to _____

Additional services (if selectable) _____

Travel Insurance without excess
(For detailed information please contact us.)

Complete package including health care without excess

Special requirements (Additional night, dietary restrictions, allergies etc.) _____

I would like to be informed about other Poppe Reisen products and hereby register for the e-mail newsletter.

After receiving the deposit invoice, I will transfer the down payment to the **account at Volksbank Mainspitze eG, IBAN: DE30 5086 2903 0000 1849 50, BIC: GENODE51GIN** within 10 days. Alternatively, credit card payment is possible, please contact us.

X _____
Date Signature (when sending by e-mail, please enter your first and last name again)

I accept the enclosed General Terms and Conditions of the tour operator Poppe Reisen GmbH & Co. KG, also on behalf of the persons I have registered here. I also agree that my personal data relating to me and the persons registered by me will be used for data processing, in this respect as this serves to process the contract. Our complete data protection declaration can be requested from us.

X _____
Date Signature (when sending by e-mail, please enter your first and last name again)