

**RESERVATION FORM**

Traveler #1

Mr. / Ms. \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mobile phone \_\_\_\_\_ E-mail address \_\_\_\_\_

Birthdate (mm/dd/yyyy) \_\_\_\_\_ *(required for AFMSP insurance)*

Passport Number \_\_\_\_\_ Country of issue \_\_\_\_\_

Health Insurance Provider \_\_\_\_\_ ID Number \_\_\_\_\_

*Please include a photocopy of your valid passport and health insurance card with this completed form.*

Additional information about you:

● Do you have a fear of heights, small spaces or similar? \_\_\_\_\_  
\_\_\_\_\_

● Do you suffer from motion sickness? \_\_\_\_\_  
\_\_\_\_\_

● Do you have any food intolerances, allergies or dietary restrictions? \_\_\_\_\_  
\_\_\_\_\_

● I am a     Skier                             Snowboarder                             Non-Skier

● If Skier or Snowboarder, please indicate your level:  
 Beginner (Green/Blue runs only)     Intermediate                             Expert

● Which part of the trip are you most looking forward to? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If this is a reservation for one person, please indicate:

- I plan to share accommodations with \_\_\_\_\_
- I wish to have single accommodations and agree to pay the \$800 single supplement.
- I'd like to know about possible roommates     male     female

Traveler #2 – please leave blank if travelling solo

Mr. / Ms. \_\_\_\_\_

Mr. / Ms. \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mobile phone \_\_\_\_\_ E-mail address \_\_\_\_\_

Birthdate (mm/dd/yyyy) \_\_\_\_\_ (*required for AFMSP insurance*)

Passport Number \_\_\_\_\_ Country of issue \_\_\_\_\_

Health Insurance Provider \_\_\_\_\_ ID Number \_\_\_\_\_

*Please include a photocopy of your valid passport and health insurance card with this completed form.*

Additional information about you:

● Do you have a fear of heights, small spaces or similar? \_\_\_\_\_  
\_\_\_\_\_

● Do you suffer from motion sickness? \_\_\_\_\_  
\_\_\_\_\_

● Do you have any food intolerances, allergies or dietary restrictions? \_\_\_\_\_  
\_\_\_\_\_

● I am a     Skier                                     Snowboarder                                     Non-Skier

● If Skier or Snowboarder, please indicate your level:  
 Beginner (Green/Blue runs only)     Intermediate                                     Expert

● Which part of the trip are you most looking forward to? \_\_\_\_\_  
\_\_\_\_\_

If this is a reservation for one person, please indicate:

- I plan to share accommodations with \_\_\_\_\_
- I wish to have single accommodations and agree to pay the \$800 single supplement.
- I'd like to know about possible roommates     male     female

**ELIGIBILITY AND RESERVATIONS**

All participants must be at least 21 years of age, and able to walk some distance. Reservations will be taken by Alliance Française on a first-come, first-served basis. Total participation is limited to 20 people.

The price for the Chamonix-Mont-Blanc tour is \$3,900 per person for non-skiers and \$4,300 per person for skiers or snowboarders (Single Supplement: \$800).

**DEPOSIT INFORMATION**

A deposit of \$500 per person is due with this form before August 31, 2022. The payment schedule for remaining balance is as follows: \$2,000 (\$2,800 with Single Supplement deposit) is due no later than Friday, October 14, 2022; the remainder must be paid no later than Friday, December 2, 2022. Please review the full cancellation statement. The deposit will be processed as soon as we receive the necessary forms from you. (see below)

Enclosed is my check, payable to Alliance Française.

Charge my deposit to my  Visa  MasterCard  American Express

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security code (in signature box) \_\_\_\_\_

\_\_\_\_\_  
AUTHORIZED CARDHOLDER SIGNATURE

\_\_\_\_\_  
DATE

Please mail completed form to Alliance Française Mpls/St Paul  
Attn: Christina Selander Bouzouina, 227 Colfax Avenue North, MN 55405

**CANCELLATION AND REFUND POLICY**

If you cancel prior to October 14, 2022, Alliance Française will refund your deposit, less a \$400-per-person cancellation fee. No refunds for participant cancellation will be made after October 14, 2022.

All participants must sign and return Waiver and Release of Liability forms, which will be mailed to you after we receive the deposit and completed reservation form. No reservation will be considered complete until Alliance Française has received these signed forms. Alliance Française reserves the right at all times to cancel all or part of the tour and refund appropriate monies paid by the participant, without further liability.

For this reason, we strongly encourage participants to not make non-refundable travel reservations until we have confirmed that the tour will take place.

If you have questions about the trip, please contact:

Christina Selander Bouzouina, [directeur@afmsp.org](mailto:directeur@afmsp.org) or 612 332 0436