

# TOURdeFORKS

...uncommon epicurean adventures

## Martinique Tour Date: August 26 to August 31, 2009

In order to secure your place, please fill in the appropriate information and mail to the address below or call Toll Free 888 345 3005

Double Occupancy  \$1,700 per person

**Prices include:** 5 nights at Plein Soleil; all breakfasts, four dinners, one lunch, tours, demonstration, excursions as listed; round trip airport transfers.

**Not Included:** International flights; excess baggage charges; airport arrival and departure taxes; travel insurance; meals, wines, or sight-seeing not included in itinerary; personal expenses such as laundry and communication charges; gratuities, email/fax/telephone charges, and hotel minibar.

**PAYMENT:** Full payment is required on reservation. Make check out to Tour de Forks. Travel insurance is highly recommended. Tour de Forks reserves the right to cancel any tour prior to its start, in which case all monies will be refunded.

**ITINERARY:** Tour de Forks has the right to make changes to the stated itinerary. We will do our best to keep changes to a minimum.

**EMERGENCY INFORMATION:** Please remember to include the information below with your deposit.

**MAIL REGISTRATION TO:** Tour de Forks, 12 East 86th St., Suite 529, New York, NY 10028

**WEBSITE:** www.tourdeforks.com **EMAIL:** info@tourdeforks.com

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## TOURdeFORKS

PAYMENT IN FULL \$ \_\_\_\_\_  CHECK ENCLOSED # \_\_\_\_\_ (payable to Tour de Forks)

PAYMENT WITH CREDIT CARD VISA/Mastercard  ACCT. NUMBER \_\_\_\_\_ EXP DATE \_\_\_\_\_

EXP DATE \_\_\_\_\_ CODE \_\_\_\_\_ NAME ON CARD \_\_\_\_\_

ADDRESS ON CARD \_\_\_\_\_ SIGNATURE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE ( ) \_\_\_\_\_ EMAIL \_\_\_\_\_ TOUR DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ (I agree with the Terms & Conditions attached)

AGE \_\_\_\_\_ NUMBER OF PERSONS \_\_\_\_\_

WHO TO CONTACT IN CASE OF EMERGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_