

BOOKING FORM

Reservations should be made by contacting Chalo Africa Tours Private Limited, hereinafter referred to as CA, at the address indicated below.

Please complete the following information so that we are able to provide you with the best service possible. Please print all information, and read and sign the Assumption of Risk and Release from Liability. Mail the completed booking form to the address below or submit it online. Each trip participant must sign a separate booking form (you may photocopy this form).

| Legal Name as it appears on Passport: | | |
|--|--------------------|--|
| | Gender: | |
| Passport Details: | | |
| Passport Nationality and Number: | | |
| Place of Issue of Passport | | |
| Passport Date of Issue(dd/mm/yyyy) | | |
| Passport Expiration Date (dd/mm/yyyy): | | |
| For Non-Resident Indians: Details of OCI/PIC | D/Residence Permit | |
| Number: | | |
| Place of Issue: | | |
| Date of Issue (dd/mm/yyyy) | | |
| Expiration Date (dd/mm/yyyy): | | |

CHALO AFRICA TOURS PVT LTD



AFRICAN SAFARIS & ADVENTURE HOLIDAYS

| Other Details: | | |
|--|---|--|
| PAN No: | | |
| Residence Address: | | |
| | | |
| | | |
| Phone Numbers: | Fax No: | |
| Email | | |
| Office Address: | | |
| | | |
| Phone Numbers: | Fax No: | |
| | | |
| | | |
| Health Concerns including allergies and | d medications you are taking: | |
| | | |
| | | |
| Dietary Restrictions: | | |
| | | |
| Special Calabrations such as hirthday of | or anniversary during the trip, specify date: | |
| Special Celebrations such as officially of | a anniversary during the trip, specify date. | |
| | | |
| Emergency Contact(s) (name and phon | e numbers): | |
| | | |

CHALO AFRICA TOURS PVT LTD



LIABILITY RELEASE & ASSUMPTION OF RISK AGREEMENT

Please read carefully before signing. You must sign and return via mail to the address above or submit it online. A separate form must be signed for each traveler. Photocopy for multiple applicants.

Voluntary Participation and Assumption of Risk

I acknowledge that I have voluntarily chosen to participate in a trip arranged by CA. In so doing, I acknowledge that I may be subjecting myself to dangers and hazards, which could result in illness, injury, or death. I also acknowledge that there are inherent risks and dangers, which may arise at any time during the trip. I am specifically familiar with and accept the risks of the dangers and hazards for this type of adventure travel. I am aware that medical services or facilities may not be available while I am participating in the trip. In order to partake of the enjoyment and excitement of this adventure travel trip I am willing to accept the risks and uncertainty involved as being an integral part of the adventure. I agree to **assume all** risks of illness, injury or death.

Release and Covenant Not to Sue

I understand that CA will contract with independent operators/suppliers/contractors to provide services on this trip, including transportation, travel services, and guide services. I understand and acknowledge that CA has no control over and assumes no responsibility for the actions of any independent operators/suppliers/contractors, and that no independent operators/suppliers/contractors has authority to make commitments for or on behalf of CA. As partial consideration for my being permitted to participate in the trip and for CA's undertakings, I agree that neither I, nor any of my heirs, personal or legal representatives, or family members will bring suit against CA, a New Delhi, India registered private limited company doing business as Chalo Africa Tours Private Limited, as a result of any acts or omissions by CA or its independent operators/suppliers/contractors. I hereby release, indemnify, and covenant not to sue CA, or its officers, directors, shareholders, employees, operators/suppliers/contractors and other persons or entities involved with this trip, for any and all claims of whatever kind arising from my participation in the trip, including, but not limited to, personal injury, illness, death, damage, or monetary losses.

Arbitration

Any controversy or claim arising out of or relating to this agreement or the performance thereunder, including without limitation any claim related to illness, injury, or death, shall be settled by binding arbitration in the state of Delhi, in accordance with the rules of the Government of India then existing, and judgment on the arbitration award may be entered in any court having jurisdiction over the subject matter of the controversy. This agreement to arbitrate does not waive or modify the liability release contained in the foregoing paragraphs.

Knowing and Voluntary Execution

I have carefully read CA's reservation information and terms and conditions, I have familiarized myself with all the information provided to me about this trip, and I agree to all stated conditions set forth in the reservation information and terms and conditions. I understand that it is a release of liability and a contract between myself

CHALO AFRICA TOURS PVT LTD



and CA and/or its contracted tour operators/supplier and affiliated organizations, and I sign this agreement of my own free will. This agreement is binding on my heirs, legal representatives and assigns.

Integration and Severability

Subject to the obligations and duties set forth herein, this Liability Release and Covenant Not to Sue, CA's Terms & Conditions, and Travel Insurance Acceptance Form, all of which are incorporated herein by this reference, express the full and complete agreement and contract of the parties here to. In the event that any term or terms of these documents are declared invalid by an arbitrator or court of law, such declaration shall not affect the remainder of the terms of the agreement, which shall be valid and enforceable.

| Participant Signature | Date |
|--|---------------------------|
| Signature of parent or guardian of participant (if a If I am signing on behalf of a minor I agree to REIDEMNIFY the entities named above for any cla | ELEASE, HOLD HARMLESS AND |
| Printed Name | |