

Advance Passenger Information [API] & Questionnaire

Some airlines, hotels and immigration authorities require passport information prior to your checkin. Please provide us the following info. You may give the completed form to your group leader. Alternatively you can email a scanned copy to us **office@stpeterspilgrimages.com** OR post it to our Head Office:

St. Peter's Pilgrimages - Diamond House, 179-181 Lower Richmond Rd, Richmond, Surrey TW9 4LN

Please complete clearly in **BLOCK CAPITALS** and always use **DD/MM/YYYY** format. The information provided to us is handled in accordance with our privacy policy & GDPR requirements. We do not work with any third-party advertiser. However we retain your contact information (not your passport info) to promote our future pilgrimages. If you do not want us to retain any of your personal data once your pilgrimage is completed. Please circle > DESTROY MY PERSONAL DATA and insert your initial here >

Destination & Date of Departure: _____

Payment : £ _____ deposit / full payment
by Cheque / Card (please phone SPP) / Bank Transfer

Room Pair Single / Pair me with _____
or pair me up with a pilgrim of the same gender (twin/triple-bedded)

Passport Details [If you gave us incorrect names, the cost of a name change WILL be passed on to you]

[Passports must be valid for a minimum of 6 months from the date you are due to return from the pilgrimage]

Title (Mr/Mrs/Ms) Surname : _____ **Date of Birth** : _____

First Name : _____

Passport Number : _____ **Nationality** : _____

Date of Issue : _____ **Date of Expiry** : _____ **Issuing Authority** : _____

Home Address : _____

_____ **Post Code** : _____

Tel / Mob no. : _____ **Email** : _____

Emergency contact in the UK while you are abroad: (Name & Tel) _____

Mandatory Travel Insurance :

If you have your own travel insurance, please state the policy number and the company name. You must not travel against medical advice. Pilgrims are required to prove that they have an appropriate travel insurance in order, otherwise we reserve the rights to refuse their booking. You may purchase travel insurance from *Cover More*.

www.covermore.co.uk tel: 01245 272 408 or your local Post Office or the Bank/Building Society.

Company : _____ **Policy No.** : _____

Mandatory Questionnaire Form - Please turn overleaf >>>

St. Peter's Pilgrimages : Questionnaires

The questions below may seem intrusive. However it is a necessary step to ensure pilgrims are aware of the facilities we can and cannot provide, the behaviours we do not tolerate on a pilgrimage. If you require a further explanation from us, you are most welcome to talk to a member of staff. We will help you fill out the form correctly. Thank you for your understanding and co-operation.

Travel Insurance

Do you have an appropriate Travel Insurance? **YES / NO**
If you don't have it at present, are you planning to get one before the departure? **YES / NO**

Why? Because, it is our company policy that we reserve the rights to refuse a booking from pilgrims traveling without an appropriate travel insurance in place.

Have you ever been refused booking by an airline / tour operator / travel agent? **YES / NO**
Have you ever been refused entry by any country? **YES / NO**
Do you require a visa / entry clearance to the destination country? **YES / NO**

Medical Condition

Do you have any medical condition that prevents you from traveling? **YES / NO**

Mobility / Special Assistance

Do you require an airport assistance (wheelchair assist to the Gate)? **YES / NO**
Can you walk for (please circle) 10-15 minutes / 30+ minutes / 1+ hour

Why? When we conduct a guided tour on our pilgrimages, the walking may be up to 2 hours. We also walk and pray at the Stations of the Cross on our pilgrimages whenever possible. The walk can be up to 30 - 40 minutes. Pilgrims can choose not to join the guided tours or the Stations.

Can you carry your bags on your own? **YES / NO**
Can you get on and off the coach by yourself? **YES / NO**

Why? If you answered NO to any of the above two questions, you are required to travel with a companion of your own (a family member or a carer, for instance) Our company staff will do their best to make your pilgrimage as comfortable as it can be, however, our staff are also responsible for other members of the group and they will not be exclusively available to attend all your needs.

Meals & Diets

Do you require a gluten-free diet due to a medical reason? **YES / NO** Or by choice? **YES / NO**
Are you a vegetarian? **YES / NO** If so, tell us what you DON'T eat. _____
Are you a vegan? **YES / NO** If so, tell us what you expect from us _____
Any allergy that we should know? **YES / NO** Please specify _____

Please note: The choice of menu for vegetarians may be limited and repetitive. For practicing vegans, you are advised to contact our office for your particular requirements so that they are aware what we can and cannot accommodate their particulars.

Thank you for your time and co-operation.

Questionnaires answered by

St. Peters Pilgrimages

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Name & Signature : Date