

# Tours & Excursions Reservation Form

Please complete the reservation form and return by fax +27 31 368 6589 or [karin@shakatours.com](mailto:karin@shakatours.com)

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## A Personal Details

Name and Title (underline family name) \_\_\_\_\_

Firm / Company / Institution \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

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Telephone (day) \_\_\_\_\_ Telephone (evening) \_\_\_\_\_

Fax (day) \_\_\_\_\_ Fax (evening) \_\_\_\_\_

E-mail \_\_\_\_\_

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## B Flight Details

Delegates name \_\_\_\_\_ Number of registered guests \_\_\_\_\_

*To be completed  
by all delegates  
requiring airport  
transfers.*

Arrival Flight No \_\_\_\_\_ From \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Departure Flight No \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Hotel Reservation at \_\_\_\_\_

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## C Tours

Pre / Post	Description	Number	Single Supplement	Price per Person*	Amount due (ZAR)
PR 1	St Lucia Estuary & Hluhluwe & Shakaland _____		R 1 200	R 7 200	_____
PT 1	St Lucia Estuary & Hluhluwe & Shakaland _____		R 1 200	R 7 200	_____

**TOURS ( C ) Total ZAR \_\_\_\_\_**

**D Excursions**

<b>Duration</b>	<b>Excursion</b>	<b>Destination</b>	<b>Number of tickets</b>	<b>Price per ticket (ZAR)</b>	<b>Amount due (ZAR)</b>
Full Day	LE 01	Hluhluwe & St Lucia	_____	R 1200	_____
Full day	LE 02	Shakaland Cultural Village	_____	R 995	_____
Full Day	LE 03	Battlefields	_____	R 650	_____
Full Day	LE 04	Zulu Village & Safaris	_____	R 995	_____
Morning	LE 05	Township Tour	_____	R 480	_____
Morning	LE 06	Durban City Tour	_____	R 330	_____
Afternoon	LE 07	Valley of 1000 Hills	_____	R 430	_____
Morning	LE 08	Durban Ocean Cruise	_____	R 375	_____
Morning	LE 09	uShaka Marine - Seaworld	_____	R 340	_____
Full Day	LE 10	Karkloof Canopy Tour	_____	R 790	_____

**EXCURSIONS (D) Total      ZAR      \_\_\_\_\_**

**Total Payment due      C + D      ZAR      \_\_\_\_\_**

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**E** Method of Payment

**By Credit Card**

Visa                      Mastercard                      AMEX                      Dinersclub

Card number \_\_\_\_\_

Expiry Date \_\_\_\_\_ CVV (*last 3 digits on the back*) \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

Date \_\_\_\_\_

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**By Bank Transfer**

Payable to Ushaka Tours & Safaris, ABSA, Umhlanga Ridge, Umhlanga Branch code 633956  
Account Number 4072308096. Please ensure that the words "CONFERENCE NAME" and your name  
appear on the transfer. A copy of the transfer must be sent to the Shaka Tours & Safaris Office. Please do  
**NOT** transfer any funds until Shaka Tours & Safaris have confirmed your tours or excursions.

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