**SEMC 2025**

**TOURS / TRANSFER BOOKING REQUEST**

*Please complete details, sign and return via email to* [*daytours@aecpt.co.za*](mailto:daytours@aecpt.co.za)

BOOKING NAME

CONTACT EMAIL

CONTACT NUMBER

HOTEL DURING SEMC 2025

**AIRPORT TRANSFERS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PASSENGER NAME | DATE | PICK-UP | TIME | FLIGHT | DROP-OFF |
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**DAY TOURS**

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| --- | --- | --- | --- | --- | --- |
| PASSENGER NAME | DATE | PICK LOCATION | TOUR | AM / PM / FULL DAY |  |
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**OVERLAND TOURS & PACKAGES**

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| PASSENGER NAME | DATE |  |  | PICK UP LOCATION | TOUR / PACKAGE | | COMMENTS |  |
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|  |  | **PAYMENT OPTIONS** | |  |  |  |  |  |
|  |  | *(To Secure Booking)* | | |  |  | | |
|  | Paygenius (Visa/ Mastercard) | |  |  |  |  | | |
|  | EFT / International Bank Transfer | |  |  |  |  | | |
|  | Paypal | |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |
|  | *By completing this booking request, I accept the standard Terms & Conditions of African Eagle Tours: https://www.daytours.co.za/en/terms-conditions* | | | | |  |  |  |

***Full Name Signature Date***