

MOTO
Costa



TOURS
Rica

Moto Tours Costa Rica, LLC
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Tour Reservation Form
(Please Print)

Name: (Last) _____ (First) _____ (M.I.) _____

Address: _____

City: _____ State: _____ Zip: _____

Preferred Tour: _____ Tour Date: ____/____/____

(check one) Rider () or Non-Rider () Shirt Size: (circle one) M L XL XXL

Best Contact Time: _____ At Phone No.: (____) _____ - _____ Email: _____

Mobile Phone No.: (____) _____ - _____ Fax: (____) _____ - _____

Emergency Contact Info: (Name) _____ (Phone No.) (____) _____ - _____

Riding Experience: _____

Medical Conditions: _____

Costa Rica Arrival Date: ____/____/____ Arrival Time: _____ Airline & Flight No.: _____

Tour Cost: \$ _____ Less Deposit: \$ _____ Balance Due: \$ _____

A \$400.00 per person deposit is required at the time of tour booking. The balance of the tour price will be due and charged to your credit card 45 days prior to your tour date. We cannot accept traveler's checks, credit cards, or personal checks in Costa Rica upon arrival.

I authorize the described above amounts in U.S. dollars to be charged to the following credit card:

(circle one) Visa M.C. Disc. Amex Card No.: _____ Exp. Date: ____/____

Security/CVV2 Code: _____ (Three digit number on the back of card. For Amex us the last four digits on the front.)

Billing Address: (if different) _____

City: _____ State: _____ Zip: _____

Signature: _____ Date: ____/____/____

If paying by credit card your card will be billed the tour balance 45 days prior to your scheduled tour date unless other arrangements are made.

Refund Policy: Cancellations made 45 days or more prior to the tour start date will result in a cancellation fee of \$200.00. The remaining balance of your deposit will be returned to you. Cancellations made between 44 and 30 days prior to the tour start date will result in a cancellation fee of your \$400.00 deposit. Cancellations made 29 days or less prior to the tour start date will result in a cancellation fee of 50% of the tour price which will be charged to your credit card.

Date Received:	____/____/____	Amount: \$	_____	Due: \$	_____	By:	_____
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