

Cambodia motorbiketours

www.cammotorbiketours.com



Rider Information and Declaration

Please print out and bring with you completed prior to riding.

Rider Name: as per passport _____

Date of Birth: _____

Passport Number: _____

Rider Licence Number (home country): _____

Phone Number: _____

Emergency Contact Name & Number: _____

Personal travel Insurance Name contact number: _____

Insurance Policy no: _____

Do you have any existing medical conditions? Yes / No

If Yes: _____

Are you taking any medicines currently? Yes / No

If Yes: _____

Do you have any known allergies? Yes / No

If Yes: _____

Declaration

By signing below, you the rider _____ declare you have read and answered all questions truthfully, declare that you are mentally and physically fit to undertake a motorcycle tour, and that you have fully read, understand and agree to the 'Terms and Conditions' as listed on our websites www.cammotorbiketours.com

Signed: _____ **Date:** / /