



P O Box 65
Paul Roux
9800

42 Joubert Street
Paul Roux
9800

Contact Numbers:
Renée Wolfaardt: 082 304 7006

Facsimile: 086 559 7449
email address: sungazerjourney@gmail.com

REGISTRATION FORM (2019)

PERSONAL DETAILS

Surname			First Names:			
ID no:		Date of Birth:		Gender:	Male	Female
Address:						
Town:		Country:		Code		
Email Address:			Cell no:			
Medical:						
Medical Aid:			Medical Aid no:			
Emergency Contact Person:			Cell no:			
Address:						
Allergies						

Tick with X your event:		Dates of Pilgrimage:				
Full Route	R 7,500.00	Week Route	Option 1: R3 750	Option 2: R4 100	Weekender Route	Option 1: Easy: R2200 Option 2: Moderate: R2 675
Slack Packing Services	Yes	No	Full route: R11 850 per group (divide amongst total pilgrims to obtain amount per pilgrim)			
Week Route Option 1: R4 750 per group / Week Route Option 2: R7 100 per group / Weekend Routes: Option 1: R1 350.00 Option 2: R2 000 per group						

BANKING DETAILS:

Name of Account: Paul Roux Conservancy

Bank: First National Bank

Code: 210743

Account No: 62595366826

Type of account: Cheque Ref no: Surname

WHAT TO BRING:

- 3 x Water Bottle
- Hat/Helmet - if you are a cyclist
- Sunblock
- Raincoat
- Sleeping Bag
- Clothes that can wash and dry easily and swimming clothes as well as a warm jacket
- Small bag washing powder
- Few clothes pegs
- Comfortable walking shoes
- Easy shoes for the evening
- All toiletries
- Cell phone and cell phone charger
- Small personal first aid: plasters for blisters, antiseptic/antibiotic cream, headache tablets
- Bath and hand towel
- Pocket money to buy snacks for lunch. There are some shops along the way where items can be purchased
- Breakfast and dinner is included in the various packages.

What is not included:

1. Snacks and lunch
2. Travelling cost when a pilgrim must be fetched.
3. Emergency services eg. ambulance and doctor's cost.

CANCELLATION POLICY:

Non arrival - no refund
0-15 days - no refund
16-29 days - 50% refund
30 days - 75% refund

DEPOSIT:

50% with registration form
Final 50% 6 weeks before pilgrimage/journey

PLEASE READ AND SIGN THIS INDEMNITY FORM:

I confirm that I have read, understood and accept the conditions of the Sungazer Pilgrimage/Journey and that I do this Sungazer Pilgrimage/Journey voluntarily. Pilgrims acknowledge that although all precautions have been taken by the organizing body to ensure the safety of all pilgrims, there may be dangers inherent to participation in the Sungazer Pilgrimage/Journey and activities related thereto. Pilgrims voluntarily assume the risks of attendance at, and participation in, the Sungazer Pilgrimage/Journey and hereby waive all claims of whatsoever nature and howsoever arising in relation to the or otherwise against any parties, including but not limited to the organizing body, owners, overnight places or any individual. Pilgrims hereby irrevocably indemnify and hold harmless the parties against any liability of any nature whatsoever and arising (whether directly or indirectly caused and whether arising from negligence, albeit gross, or from the participation or involvement in, or passage to, or from the Pilgrimage/Journey or otherwise) including but not limited to liability for delay, inconvenience, accident, death, injury, illness to their person, or loss or damage to property or costs and expenses sustained, incurred or put to by Pilgrims and/or by any minor children under the care or control of Participants. Parents or guardians authorizing a minor's participation in the Sungazer Pilgrimage/Journey, which shall prima facie be evidenced by their signature on this registration form, hereby consent to such minor being bound to the afore going and further indemnify the parties to extent, if any, to which such minor is not capable of waiving his/her rights as stipulated above.

Full Name and Surname:

Signature: Date:

Signature of Parent/Guardian (if under 21 years):