

VACANZE, TOUR E TRAINING IN BIKE

**Form to complete and send to**

[info@bikearound.it](mailto:info@bikearound.it) (to make sure it has been received – and also to avoid any spamming issues –don't forget to ask for a return receipt); by fax to +39-0125421245; by post to bike@round, via F. Chiaves 1/B, 10015 Ivrea (TO), Italy.  
If you have problems sending or completing the form, please contact +39-012545174.

Name of the tour **s\_VIGNA\_mocela two days among the vineyards**

2012 dates  Saturday 28 April/Monday 30 April  Friday 1 June/Sunday 3 June  
 Friday 13 July/Sunday 15 July  Sunday 29 July/Tuesday 31 July  
 Sunday 12 August/Tuesday 14 August  Friday 31 August/Sunday 2 September  
 Friday 28 September/Sunday 30 September  Friday 12 October/Sunday 14 October  
 ..... (dates agreed for pre-formed group)

Number of adults ..... number of children/teenagers ..... aged .....

Number of rooms ..... single/single occupancy double double triple  
preferably twin beds  preferably double bed

Any extra nights from ..... to .....  
rooms as above  .....different  .....

Supplement for half board on dates .....

Bike own  hire   
number of bikes for adults ..... 60 Euros for two days  
number of bikes for children ..... 60 Euros for two days

Optional healthcare and medical fee insurance:

Please send me an estimate  I am not interested

Other needs .....  
.....

We are arriving by car  train  plane   
expected arrival time at hotel about .....

How did you find out about bike@round?

internet  friends  biking magazine  other magazine  fair  other

Complete the following details for every person. For family groups show the data applicable to all members just once, but in any case give the name and surname, date of birth, height and tax number (if applicable).

Group leader

Surname ..... Name .....  
Address ..... Post Code..... City..... Province .....  
Country ..... Tel. No. .... Fax .....  
Cell phone ..... E-mail.....  
Tax/National Insurance No. (if applicable) ..... Date of birth .....  
Height (for the hire bike) ..... Occupation .....

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Other members

Surname and name	Address	Date of birth	Height
2. ....	.....	.....	.....
3. ....	.....	.....	.....
4. ....	.....	.....	.....
5. ....	.....	.....	.....

Payment of the full sum of ..... Euros, as per your estimate dated .....

By bank transfer to Banca Sella IBAN IT16E0326830549053845312870

Payee: bike@round-Altarego srl

Reason for payment: Name and surname of the group leader

Date..... Signed .....

This contract will be considered concluded on acceptance of this form by the organiser. I hereby expressly declare that I have read the technical sheet and general contract conditions, and in particular points 8) CHANGES OR CANCELLATION OF THE PACKAGE PRIOR TO DEPARTURE; 9) WITHDRAWAL OF THE USER; 10) CHANGES AFTER DEPARTURE; 15) LIMITS OF LIABILITY; 17) COMPLAINTS. Signing of this contract implies acceptance of the general conditions of the contract.

Information on law 675/96 art. 11 (consent) and DLgs 196/03 art. 7 (rights of the person involved), art. 23 (consent), art. 37 (notification), in respect of the Privacy Code concerning the treatment of personal data: we confirm that your e-mail and postal addresses will be used exclusively in connection with communications concerning your tours and will not be communicated to third parties. By signing below you give your consent for us to treat your personal data (inclusion in our database). The data holder is bike@round-Altarego srl, responsible for data treatment, appointed in accordance with art. 8. Data will be treated lawfully and correctly, collected and recorded for legitimate, clearly stated purposes.

Date .....Signed .....