



Being with God in Nature

Australian Province of the Society of Jesus

Australian Ignatian Trail

walking in the footsteps of the first Jesuits in Australia

7 walking days, 9 nights, 144km

23rd August – 1st September 2020

Booking Request Form

Please complete the following form and return to:
Geraldine Naismith email: gmnaismith@gmail.com

Title: _____ First name: _____ Surname: _____

Address: _____

City: _____ State: _____ Postcode: _____

Phone: _____ Mobile: _____ Email: _____

Date of Birth: _____ Religious Affiliation (if any) _____

Present Occupation: _____

Emergency contact details: Name: _____ Relationship: _____

Address: _____

Mobile Phone number: _____ Home/work phone number: _____

I wish to reserve a place on the Australian Ignatian Trail pilgrimage, from 23rd August – 1st September 2020.

The cost of this Australian Ignatian Trail pilgrimage is \$1690.00. A non-refundable deposit of \$50.00 is required at the time of booking. A further deposit of \$700.00 is required three weeks after the initial booking. The balance of \$990.00 is to be paid by 1st June 2020.

This is a group pilgrimage with a maximum of 10 people plus two leaders. Early bookings are advised.

(This costing is subject to having a maximum of 10 pilgrims plus two leaders.)

Cancellation after the 1st June 2020 will result in 50% refund of monies paid less \$50 initial deposit.)

Cancellation after 1st July 2020 will result in no refund being paid.

Please say briefly why you want to walk this pilgrimage? _____

Provision of Meals and Dietary Requirements:

Three breakfasts, two dinners and one lunch are included. Please advise if you have special dietary requirements and we will pass this information on to the accommodations providing meals, for their attention and consideration.

Any other critical allergies: _____

Health information:

Please inform us of any disability or medical condition that may impact on you during the Australian Ignatian Trail pilgrimage, including any medications you are taking. Are there any other issues we need to know that could affect you on this walking pilgrimage?

Have you participated in a multi-day walk in the past? Please outline.

What experience have you had of day walks, bushwalks etc.?

Fitness requirements:

The Australian Ignatian Trail pilgrimage (7 walking days, 9 nights) requires a level of fitness that enables you to walk seven consecutive days on some relatively hard surfaces - 13km, 23km, 32km, 22km, 15km, 20km, 19km - on quiet, gravel & dirt roads and established trails such as the Jack Bobridge Trail, Heysen Trail, Rattler Trail and the Riesling Trail. How would you rate your current level of fitness? How do you intend to train for this pilgrimage?

I declare that all the information provided by me is true, complete and correct in every detail.

[The information will be used for this Australian Ignatian Trail pilgrimage only. It will not be used for any other purposes]

Signature(s): _____ **Date:** _____

On receipt of your application, a leader (Geraldine Naismith or Fr. Iain Radvan) will contact you to provide further information about the Australian Ignatian Trail to ensure this pilgrimage is suitable for you.

Risk waiver:

In case of an emergency, I authorize the leaders of the Australian Ignatian Trail where it is impracticable to communicate with me, to arrange for me to receive such medical or surgical treatment as may be deemed necessary. I also undertake to pay or reimburse costs which maybe incurred for medical attention, ambulance transport and drugs while I am registered as part of this pilgrimage.

I understand that although the Australian Ignatian Trail and its leaders attempt to minimize any risk of personal injury within practical boundaries, accidents do happen and that all physical activities carry the risk of personal injury. I acknowledge that there is an inherent risk of personal injury in physical activities that will be undertaken as part of the Australian Ignatian Trail.

I understand that I participate in the Australian Ignatian Trail at my own risk and that my local GP should be contacted before starting any form of exercise.

Full name: _____

Signature: _____ Date: _____

Payment Details – I would like to:

- Pay a deposit of \$..... to confirm my place in this pilgrimage.
- Pay the full amount of \$.....for this pilgrimage.

Method of payment:

Direct Debit:

BSB: 062 000
Account No: 1714 4664
Account Name: CIS Sevenhill

Please reference – **AIT7your surname**

Please debit **MasterCard** **Visa card**

Name appearing on credit card: _____

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Expiry Date: □□/□□ Signature: _____