**Portus Project**

**2014 Season**

|  |  |
| --- | --- |
| **Name:** |  |
| **Email:** |  |
| **Mobile Phone no:** |  |
| **Address in June:** |  |
| **Any special diet or food requirements?** |  |
| **Medical conditions and Allergies ?** |  |
| **Please give us details of your travel arrangements arriving and departing from Fiumicino** |  |
| **Closest Kin in case of emergency - please include name and contact telephone number/s** |  |