REGISTRATION FORM

60th International Art Exhibition LA BIENNALE DI VENEZIA with Desert X

Dates: June 14 – 18, 2024

To reserve your space, please complete this form and return along with a copy of your passport to lou@liaisonscorporation.com

Personal Information:

Name(s) in full as	on passport:			
Primary Residence	ce:			_
City:	State:	Zip:	Country:	-
Email:		Date of b	irth:	
Phone:		Cell:		
lf applicable, I pl	an on sharing a room wit	.h		
Dietary Restrictio	ons:			
Do you require a	ny special assistance whi	le on the trip?		
Do you have any	medical conditions?			
Are you a memb	er of other institutions, n	nuseums? If so, which	ones?	
Would you like to	o be tagged by Liaisons	on instagram ? If so, w	/hat's your username?	
Would you be in	terested in a trip extension	on to Zurich for Art Ba	sel before this travel experience?	
Emergency cont	tact information:			
Name:				

Phone: _____

In order to enhance your travel experience with us, we kindly ask to highlight any other general interests:

Art	Gastronomy	Jewellery
Culture	Wine	Outdoors
Ballet	Cars	Science
Music	Yachts	Design
Classical music	Fashion	Other (please specify)

One-person room occupancy: \$11,500 USD

Two-person double room occupancy: \$9,900 USD per person (\$19,800 USD per couple)

50% non-refundable deposit due upon registration to secure your spot. 50% balance due on April 8th, 2024.

**Upon completion of registration form, an invoice will be issued for payment.

Wire Transfer

Credit Card *If payment is made via credit card, a 4% processing fee will be added.

Invoice Information:

1. Name for the Invoice:

[] Same as above

[] Other: ______ (Please specify the name for the invoice)

2. Email for Invoice Delivery:

By submitting this registration form, you agree to receive the invoice via the provided email address and comply with the payment instructions mentioned therein.

Refunds & Cancellation Policy

Due to the nature of this custom trip, all payments are non-refundable and trip insurance is strongly recommended. On occasion, it may be necessary to alter the itinerary, although the changes will not affect the high quality of the trip.

By forwarding payment I/we acknowledge that I/we have read and accept the refunds and cancellations policy and all terms and conditions set forth above.

Name(s)			

Signatures (s) _____ Date _____

Liability Disclaimer

LIAISONS strives to ensure a safe and enjoyable travel experience for all participants. However, please be advised that LIAISONS shall not be held liable for any loss, injury, damage, delay, or inconvenience arising from any cause beyond our control. This includes but is not limited to acts of nature, government actions, transportation delays, accidents, and unforeseen circumstances.

Participants are strongly advised to acquire comprehensive travel insurance to cover any potential risks associated with their trip. By registering for our travel services, participants acknowledge and accept that LIAISONS, its employees, agents, and affiliates are not responsible for any personal injury, property damage, or other loss that may occur during the course of the trip.

In the event that unforeseen circumstances necessitate changes to the itinerary, LIAISONS reserves the right to make adjustments for the safety and well-being of all participants. Participants understand that they are responsible for their own health, safety, and personal belongings throughout the duration of the trip.

By signing this registration form, participants agree to release LIAISONS from any and all liability associated with their participation in the trip.

