

TOUR BOOKING FORM

PLEASE COMPLETE, SIGN AND RETURN THIS FORM, WITH YOUR DEPOSIT PAYMENT, TO:
DESTINATION MANAGEMENT, PO BOX 1109, STAFFORD. QLD. 4053

TOUR NAME:	DEPARTURE DATE:
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TITLE (Mr/Mrs/Ms/Dr)	SURNAME (As per passport)	GIVEN NAMES (As per passport)	DATE OF BIRTH (dd/mm/yyyy)	PREFERRED NAME (For name tag)	OCCUPATION
1.					
2.					

Mailing Address	P/code
Phone - Home:	Business:
Email Address:	
In the case of emergency, who can we contact while you are on tour?	
Name:	Phone:

PLEASE SEND A PHOTOCOPY OF YOUR PASSPORT WITH THIS BOOKING FORM

1. Passport Number	Date issued	Expiry date	Nationality
2. Passport Number	Date issued	Expiry date	Nationality

PREFERRED HOTEL ACCOMMODATION

- Twin bedded room Single Room (Surcharge applies)
 Please find me a rooming companion. Single room surcharge will apply if we cannot find a rooming companion for you.

SPECIAL REQUIREMENTS:

Please mention ANY special needs or requirements that your tour manager should know about.
 (Eg. dietary, allergies, medication; mobility problems/disability/impairment/illnesses; other)

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FLIGHTS: Please circle which option is applicable to you

I/we would like assistance from Destination Management with flight reservations.
 Please have someone from your office contact me to discuss the options available.
OR

I/we will be attending to my/our flight reservations independently of Destination Management and will advise you of my/our flight reservations when I/we have this information in hand.

Would you like any assistance from Destination Management with pre or post tour travel accommodation or touring?.....

Do you smoke?.....How did you find out about this tour?.....

PASSENGER DECLARATION AND PAYMENT DETAILS

PASSENGER DECLARATION

I/We have read and understood the booking conditions and accept these conditions. I/We am/are physically able to travel.
 By paying a deposit, I/we agree to accept the booking conditions as listed.

PAYMENT DETAILS

To reserve your place on this tour, a security deposit payment of \$600 per person must accompany this booking form.
 Please note that final payment for this tour is due in our office at least 60 days prior to departure.
 Bookings made within the 60 days prior to departure must be accompanied by full payment.

Method of payment: Cheque / Visa* / Mastercard* / Bank transfer (contact our office for account details)

* A surcharge applies to credit card payments. This is a variable rate, determined by the type of credit card used for payment.

Card Number..... Expiry Date.....Name on Card.....

SIGNATURE

Destination Management

PHONE: Toll Free 1300 307 317 Local: 07 3359 6651 - FAX: 07 3359 1263 - EMAIL: travel@toursgallery.com

DATE

ABN 66 010 655 142