

BOOKING FORM - Central Australia Music Tour

TRAVELRITE INTERNATIONAL PTY LTD

182 Canterbury Rd, Heathmont, VIC, 3135

Telephone 1800 033 436, (03) 9729 8722, Fax (03) 9729 0682, Email: heathmont@travelrite.com.au

To secure your place on the Australian Outback Music tour please complete this form and return together with your non-refundable deposit payment of \$500 per person to above address.

Please reserve _____ place(s) on the:

Central Australia Music Tour with Wayne Horsburgh and John Howie 2017

8 May 2017: Extension Tour to Darwin on the Ghan

5 May 2017: The Kangaroo Sanctuary, in Alice Springs (\$95 per adult)

28 Apr 2017: Wilpena Pound Scenic Flight - 30 minute (\$220.00 per adult subject to fuel costs)

Wilpena Pound Scenic Flight - 20 minute (\$190.00 per adult subject to fuel costs)

	FIRST PASSENGER	SECOND PASSENGER
LAST NAME (As in passport)		
FULL GIVEN NAME (As in passport)		
TITLE (Mr/Mrs/Miss/Ms)		
PREFERRED NAME (For Name Badge)		
ADDRESS		
STREET		
SUBURB / TOWN		
STATE		
POSTCODE		
HOME TELEPHONE		
MOBILE PHONE NUMBER		
BUSINESS TELEPHONE / FAX		
EMAIL ADDRESS		
BIRTHDATE		
TWIN SHARE (Require match or Sharing with:) / SINGLE ROOM		<input type="checkbox"/> Double Bed <input type="checkbox"/> Twin Beds
FREQUENT FLYER NUMBER (AIRLINE):		
ARE YOU A SMOKER ?		
SPECIAL MEAL REQUESTS:		

Health & Fitness

Travelrite International tours require a certain level of health and fitness. When signing this form you confirm that all persons mentioned on this form have a level of fitness that allows them to take part in this tour without assistance from others.

Travel Insurance:

Travel Insurance is compulsory when travelling on a Travelrite International tour. Travelrite International will send you an application form with your receipt. Please contact our office to discuss options.

Credit Card Payment (or \$500 per person cheque)

Please charge my: Visa Mastercard Amex Diners

Card Number: _____ Expiry Date: _____ Amount: _____

Terms & Conditions

I/We have noted the tour terms & conditions and agree to be bound by them.

Signed _____ Date _____

A name and address list will be provided to each tour member. If you do **not** want your details included please tick:

Please provide information of additional travel arrangements required:

_____ A.C.N. 005 817 078 Licence No. 30858