



**Booking Form: LONGREACH, BIRDSVILLE & WINTON 2019**

**Escorted by LINDA OWEN**

**TOUR DATES: 18<sup>th</sup> – 30<sup>th</sup> August 2019**

PLEASE COMPLETE A SEPARATE FORM FOR EACH PERSON TRAVELLING *(Please print clearly)*

TITLE: MR/ MRS/ MS/ MISS:  SURNAME:

COMPLETE NAME AS PER YOUR PASSPORT:

PREFERRED NAME:  OCCUPATION:

ADDRESS:

POSTCODE:

PH: HOME:  MOBILE:

EMAIL:

DATE OF BIRTH:  PHOTO ID:   copy received

SINGLE ROOM:  TWIN SHARE ROOM (2 beds):  DOUBLE ROOM:

I WOULD LIKE TO SHARE TWIN / DOUBLE ROOM WITH:

ANY SPECIAL EVENTS? (anniversaries etc)  DATE:

SPECIAL DIETARY REQUIREMENTS/ALLERGIES:

ANY PRE-EXISTING MEDICAL CONDITIONS? YES / NO If yes, please contact our office for further information.

QANTAS FREQUENT FLYER DETAILS: NO:

SEAT REQUEST FOR FLIGHTS: AISLE  WINDOW  (seating is a request only and not guaranteed)

FLIGHT UPGRADES REQUIRED:  BUSINESS CLASS (price on application)

TRAVEL INSURANCE DETAILS (if known) INSURER:

POLICY NO:  INSURANCE EMERGENCY NO:

**IN CASE OF EMERGENCY PLEASE CONTACT:**

NAME:  RELATIONSHIP:

ADDRESS:

POSTCODE:

PH: HOME:  MOBILE:

EMAIL:

**PAYMENT METHODS**

**CHEQUE:** please make it out to GIPPSLAND TRAVEL CENTRE.

**CREDIT CARDS** A surcharge for credit cards and debit cards will apply. Fee advised on application.

TYPE OF CARD: ie. Visa / Mastercard / Amex .....Debit/Credit:.....

CREDIT CARD DETAILS: NAME ON CARD: \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

CARDHOLDER SIGNATURE: \_\_\_\_\_ CCV: \_\_\_\_\_

or SIMPLY ENTER THIS LINK INTO YOUR BROWSER: (Google Chrome Recommended).

<https://pay.travelpay.com.au/GIPPSTRAV>

Please quote as Reference: (Your Surname and/or Booking Number)

**DIRECT BANK DEPOSIT** – Account details are:

Bank: CBA Warragul.

BSB: 063 532.

Account No:

1045 4100.

Account Name:

Gippsland Travel Centre Pty Ltd Trust Account

Reference:

(Your Surname)

**PAYMENT DETAILS**

FULL DEPOSIT: \$500 per person due: Wednesday 31<sup>st</sup> October 2018

FINAL PAYMENT Due: Wednesday 29<sup>th</sup> May 2019

To secure my place on the tour, I agree to pay a deposit of **\$500** per person by 31<sup>st</sup> October 2018. After this date, the deposit is non-refundable. Final payment is due Tuesday, 9 January, 2018. An invoice will sent to you at least four weeks prior to the due date.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**TRAVEL INSURANCE**

Gippsland Travel requires all participants to obtain comprehensive travel insurance by the time of final payment. We offer a comprehensive policy with a reputable insurer if required.

**IDENTIFICATION**

Photo identification is required for this tour.

We will require a copy of a current driver’s licence or ID card.

**UNUSED PORTION OF THIS TOUR**

We regret refunds will not be given for any unused portions of this tour, such as meals, entry fees, accommodation or transfers.

**ITINERARY CHANGES:**

Occasionally circumstances beyond the control of Gippsland Travel make it necessary to change airlines, hotels or amendments to daily activities. We will inform you of any changes as soon as they occur.

