

Accommodation Information

PLEASE PRINT

Surname: <input type="text"/>	Given Name: <input type="text"/>	Phone: <input type="text"/>	Address: <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: Accommodation is based on double occupancy

<input type="checkbox"/> Single Supplement	<input type="checkbox"/> I am traveling with a friend
<input type="checkbox"/> We are a couple	<input type="checkbox"/> We are a family
<input type="checkbox"/> I/We are travelling with:	<input type="text"/>

I/we would prefer that the room be arranged with:

2 Single beds 

1 King bed

1 Cot (available if traveling with children)

Flight Information

Flight Arrival

<input type="text"/> <small>AIRLINE & FLIGHT NUMBER</small>	<input type="text"/> <small>FROM</small>	<input type="text"/> <small>TO</small>	<input type="text"/> <small>ARRIVAL DATE</small>	<input type="text"/> <small>ARRIVAL TIME</small>
<input type="text"/> <small>AIRLINE & FLIGHT NUMBER</small>	<input type="text"/> <small>FROM</small>	<input type="text"/> <small>TO</small>	<input type="text"/> <small>ARRIVAL DATE</small>	<input type="text"/> <small>ARRIVAL TIME</small>

Departure Information

<input type="text"/> <small>AIRLINE & FLIGHT NUMBER</small>	<input type="text"/> <small>FROM</small>	<input type="text"/> <small>TO</small>	<input type="text"/> <small>ARRIVAL DATE</small>	<input type="text"/> <small>ARRIVAL TIME</small>
<input type="text"/> <small>OTHER</small>	<input type="text"/> <small>FROM</small>	<input type="text"/> <small>TO</small>	<input type="text"/> <small>ARRIVAL DATE</small>	<input type="text"/> <small>ARRIVAL TIME</small>

Hotel Information

<input type="text"/> <small>HOTEL</small>	<input type="text"/> <small>PHONE/FAX</small>	<input type="text"/> <small>CHECK IN DATE</small>	<input type="text"/> <small>CHECK OUT DATE</small>
<input type="text"/> <small>HOTEL</small>	<input type="text"/> <small>PHONE/FAX</small>	<input type="text"/> <small>CHECK IN DATE</small>	<input type="text"/> <small>CHECK OUT DATE</small>

Emergency Contact

SHOULD YOUR TRIP BE DELAYED FOR ANY REASON (E.G. WEATHER), PLEASE LIST A CONTACT THAT WE CAN NOTIFY OF THE DELAY.

<input type="text"/> <small>NAME</small>	<input type="text"/> <small>RELATIONSHIP</small>	<input type="text"/> <small>HOME PHONE</small>	<input type="text"/> <small>WORK PHONE</small>	<input type="text"/> <small>EMAIL</small>
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*Do you have any special dietary needs or is there anything you cannot tolerate eating that may be on the menu (e.g. fish or wild meat)? Yes No

If "Yes" Please specify:

Will you or any one you are traveling with be celebrating a special occasion on the trip?

Yes No

Type of celebration: Date:

Other Interests: Bird watching Fishing Photography Canoeing Kayaking Geology

Other: