

# SENIOR LEAGUE WORLD SERIES 2017

ROOM TYPE       Single     Twin     Double     Triple     Quad  
ARE YOU TRAVELLING ALONE AND LOOKING TO SHARE       Yes       No

NAME: Mr/Mrs/Ms/Dr \_\_\_\_\_ MALE/FEMALE  
(as per passport)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ P/CODE \_\_\_\_\_

COUNTRY \_\_\_\_\_ DATE OF BIRTH \_\_\_/\_\_\_/\_\_\_ SHIRT SIZE \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL \_\_\_\_\_

PASSPORT NO: \_\_\_\_\_ COUNTRY \_\_\_\_\_

FAMILY/FRIEND COMPETING \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NOTES / REQUESTS \_\_\_\_\_

## **GUEST 2**

ROOM TYPE       Single     Twin     Double     Triple     Quad

NAME: Mr/Mrs/Ms/Dr \_\_\_\_\_ MALE/FEMALE  
(as per passport)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ P/CODE \_\_\_\_\_

COUNTRY \_\_\_\_\_ DATE OF BIRTH \_\_\_/\_\_\_/\_\_\_ SHIRT SIZE \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL \_\_\_\_\_

PASSPORT NO: \_\_\_\_\_ COUNTRY \_\_\_\_\_

FAMILY/FRIEND COMPETING \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NOTES / REQUESTS \_\_\_\_\_

## **ATTACH ADDITIONAL SHEETS IF MORE THAN 2 IN GROUP**

### **PAYMENT DETAILS**

#### **TOTAL PRICE**

#### **1. Bank Transfer.**

Bank: Commonwealth Bank

BSB: 06 2231

In DESCRIPTION tab write "SLWS – your name" (eg. SLWS - Jones)

Acc Name: SportsLink International

Acc No: 1043 9397

#### **2. Credit Card (2.5% surcharge applies to Visa, MCard)**

Type of Card      VISA      MASTERCARD

Card No: \_\_\_\_\_ Expiry \_\_\_/\_\_\_ CVV \_\_\_\_\_

Name \_\_\_\_\_ Amount \$ \_\_\_\_\_

**SIGNED** \_\_\_\_\_ **DATE** \_\_\_\_\_

Email completed form to: [bookings@sportslinkinternational.com](mailto:bookings@sportslinkinternational.com)