

GOLD COAST 2018 - BOOKING FORM

BOOKING 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 _____

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 _____

50% Deposit to accompany booking

Balance due by Dec 15, 2018

1. Bank Transfer.

Bank: Commonwealth Bank

BSB: 06 2231

In DESCRIPTION tab write "GC18 – your name" (eg. GC18 - 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