

NCIE ACCOMMODATION BOOKING FORM

CONTACT DETAILS

NAME: _____

EMAIL: _____

ADDRESS: _____

NUMBER OF ATTENDEES

FEMALE ADULTS : _____ MALE ADULTS: _____ OTHER ADULTS: _____

FEMALE CHILDREN: _____ MALE CHILDREN: _____ OTHER CHILDREN: _____

TOTAL NUMBER OF BEDS REQUIRED: _____

INDIGENOUS STATUS

INDIGENOUS: _____

NON INDIGENOUS: _____

DATE REQUIRED

ARRIVAL: _____

DEPARTURE: _____

DO YOU REQUIRE AIRPORT TRANSFERS Yes / No

If yes please provide flight details:
