

SAINT AND SHRINES OF ENGLAND & SCOTLAND

Friday 20 May to Thursday 9 June 2016
Booking Form

YOUR CONTACT DETAILS

Name:.....
Address: Suburb: Postcode:
Home tel: Work tel: Mobile:
Email address:
I prefer contact by: Telephone / Email

PLEASE MAKE A BOOKING AS FOLLOWS

BOOKING DETAILS (Full passenger name EXACTLY as shown on your passport)

Passenger 1 Name:
Date of Birth: Passport No: Passport Expiry:
Frequent Flyer Airline Programme Number:

Passenger 2 Name:
Date of Birth: Passport No: Passport Expiry:
Frequent Flyer Airline Programme Number:

ADDITIONAL PASSENGERS, PLEASE PROVIDE THE ABOVE DETAILS ON A SEPARATE SHEET

PAYMENT

..... I have enclosed \$ as deposit (\$2,000 per person) for the above booking. Please make cheques payable to St James Rail.

..... I have paid by Electronic Funds Transfer (EFT) as described previously. Please email SJR to advise and send this form.....

Account Name: St James Rail
BSB: 033 364
Account Number: 612826
Reference: Your name and 'Saints 2016'

A letter / email will be sent acknowledging receipt of your deposit and providing further details.

AIR TRAVEL TO/FROM LONDON / EUROPE

- Please book me/us to travel to London on Fri 20 May 2016 and return from the UK on 9 June 2016.
- Please book me/us to travel to London on Fri 20 May 2016. I/we wish to return as below:
I/we wish to depart London for Sydney on:
- I/we wish to depart for Sydney on:
- Economy class air travel
- Premium Economy class air travel - we will call/email to advise of the costs
- Business class air travel – we will call/email to advise of the costs.
- Please book me/us 'land only' arrangements and we will organise our own travel to and from London.

HOTEL ACCOMMODATION

Single rooms: Double rooms: Twin (two bedded) rooms:

If twin, please advise the name of the pilgrim you have agreed to share with:

A single supplement is payable for sole use of rooms in hotels.

SPECIAL REQUESTS

Please indicate any dietary or any other sort of special request :

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INSURANCE

..... Please send an insurance policy form for my/our consideration.

YOUR SIGNATURE

I have read the booking conditions outlined above and accept them on behalf of myself and my party by whom I am authorised to make this agreement.

Signature of person making reservation: Date:

Cancellation charges will apply as advised in this itinerary. An insurance policy can be forwarded.

Telephone 02 9326 9660
Email sjr@digitor.com.au

Mobile 0418 585 838
Web www.stjamesrail.org