

## **Booking Form Griffith University Village**

<b>Contact De</b>	tails					
TITLE: FIRST NAME: SURNAME:						
ADDRESS:						
SUBURB:		STATE:		POSTCODE:		
COUNTRY:	EMA	IL ADDRESS:				
PHONE:		MOBILE:				
Accommod	ation Details					
Room Type (F	PLEASE TICK):					
0	Single Room In 5 Bed	droom Apartment	(Shared Fac	cilities)		
0	Whole 5 Bedroom Ap	artment				
0	Double Bed in 5 Bedr	room Apartment (S	Share Facilit	ies)		
Saturday & St	vailable from 2pm. Chec unday Please contact ou iving out of these recept	r Resident Assistants	on duty - 04	402548975 ´	• •	
DATE OF ARRIV	'AL://					
DATE OF DEPAR	RTURE: / /					
NUMBER OF GU	ESTS:	APPRO	X. TIME OF AR	RIVAL:		
HOW DID YOU I	FIND OUT ABOUT GRIFFITH	UNIVERSITY VILLAGE?	,			
REASON FOR S	ГАҮ					
Terms & Co	onditions (Surcharge 2%	% on all credit card tran:	sactions, we do	o not accept Diners	s or American Express)	
CREDIT CARD:	VISA / MASTERC	ARD				
CREDIT CARD N	IUMBER:					
CARDHOLDER N	IAME:					
EXPIRY DATE:	/	AMOUNT:				
CARDHOLDER S	SIGNATURE					

Booking Policy: A 48 hour cancellation policy applies. Any cancellation or amendments within this period are subject to the full accommodation charge.

Guests will be required to make full payment prior to arrival. Guests will also be required to provide photo ID at check-in.