FEDERATION 2010

ACCOMMODATION BOOKING FORM

Club: ……..…….. **Contact Name:** ……..…….. **Email Address:** …….. **Phone:** ……..…..

First Name	Surname	Phone (preferably mobile)	Special Dietary Require-ment ('Yes') [Note 1]	Accomm Group [Note 2]	Accommodation Category (enter 'Yes' where applicable)							Dinner on Friday night ('Yes') ($10.50)	Amount Paid
					No of Persons per room and facilities								
					2 ensuite ($135 pp)	2 shared ensuite ($132 pp)	2 communal facilities ($130 pp)	3 or 4 ensuite ($127 pp)	3 or 4 shared ensuite ($124)	3 or 4 communal facilities ($120 pp)	5 or 6 communal facilities ($117 pp)		
											TOTAL		

Note 1: Ensure information on Special Dietary Requirement is entered on Federation 2010 Registration Form (Part B)

Note 2: This is the means to group people together in one room. For example, enter 'A' for each person in the first group/room and 'B' for each person in second group/room, etc.