

DECEMBER/JANUARY BOOKING REQUEST

Date: _____

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

ELIGIBILITY VERIFIED: _____

TOTAL AMOUNT: _____

OF GUESTS: _____

ROOM TYPE _____

INTERCONNECTING:

SOFA BED:

ENABLED FRIENDLY:

Monday	16/12 – 23/12	23/12 – 30/12	30/12 – 06/01	06/01 – 13/01	13/01 – 20/01
Tuesday	17/12 – 24/12	24/12 – 31/12	31/12 – 07/01	07/01 – 14/01	14/01 – 21/01