

DECEMBER/JANUARY BOOKING REQUEST

Date: _____

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____ ELIGIBILITY VERIFIED: _____

TOTAL AMOUNT: _____ CURRENT/EX-SERVING: _____

ROOM TYPE _____ # OF ADULTS/CHILDREN: _____ / _____

INTERCONNECTING:

SOFA BED:

ENABLED FRIENDLY:

Monday	14/12 – 21/12	21/12 – 28/12	28/12 – 04/01	04/01 – 11/01	11/01 – 18/01
Tuesday	15/12 – 22/12	22/12 – 29/12	29/12 – 05/01	05/01 – 12/01	12/01 – 19/01
Wednesday	16/12 – 23/12	23/12 – 30/12	30/12 – 06/01	06/01 – 13/01	13/01 – 20/01