

Booking & Contact Details Form

School Name:				
Teacher Contact:				
Email:				
Mobile (During Stay):				
School Address:				
Suburb:		\$	State:	Postcode:
School Phone:		\$	School Fax:	
Arrival Date:		/	Arrival Time:	
Departure Date:		[Departure Time:	
Number of Students:				
Number of Teachers:				
Student Year Level:				
Do all students have a current RSA?:	Yes	No		

Would you like to visit our Theme Parks?

Sea World	Date of entry:
Warner Bros. Movie World	Date of entry:
Wet'n'Wild Water World	Date of entry:



Special Dietary Requirements:

Please advise if students or teachers have any special dietary requirements:

No

Yes If Yes, please list:

Notes: (Please let us know of any additional information/requests for your stay that will ensure an enjoyable program)

Please return this form to the School Excursions Office Email: Hotel_school@vrtp.com.au