



TRAVEL BOOKING ORDER FORM



PLEASE READ CAREFULLY and complete this form, noting all requirements and send to Show Group by facsimile or e-mail,

Attn: Craig Boyd
Show Group Enterprises Pty Ltd
Level 3 / 4A Lord Street
Botany NSW 2019 Australia

Tel: 61 2 9352 9923
Fax: 61 2 9352 9911
Email: craig.boyd@showgroup.com.au
ABN: 86 070 810 703

CLIENT DETAILS:

SURNAME NAME _____ FIRST NAME _____ TITLE _____ COMPANY _____

NUMBER OF PEOPLE REQUIRED _____ E-Mail address _____

Telephone: (BUS) _____ (MOB) _____ (FAX) _____

ACCOMMODATION REQUEST: Rooms are available at several hotels at special negotiated rates. To access these rates and to make a booking please complete the section below. Please tick a box for applicable hotel, room type and rate. Rates are based on single or double occupancy. The event is on from **3 – 5 November 2010** at the **Perth Convention & Exhibition Centre**.

Hotel	Type	Rate		Address	Hotel Website
Medina Executive	2 Bedroom	\$234	<input type="checkbox"/>	138 Barrack Plaza, Perth	www.medina.com.au
Ibis Hotel	Standard Room	\$230	<input type="checkbox"/>	334 Murray Street, Perth	www.ibishotels.com.au
Medina Grand	1 Bedroom	\$210	<input type="checkbox"/>	33 Mounts Bay Road, Perth	www.medina.com.au
Hyatt Regency	Standard King	\$199	<input type="checkbox"/>	99 Adelaide Terrace, Perth	www.perth.hyatt.com
Medina Executive	1 Bedroom	\$191	<input type="checkbox"/>	138 Barrack Plaza, Perth	www.medina.com.au
Sebel Residences	Studio	\$185	<input type="checkbox"/>	60 Royal Street, East Perth	www.mirvachotels.com.au
Somerset	Studio	\$180	<input type="checkbox"/>	185 St Georges Tce, Perth	www.somerset.com
Mantra on Murray	Studio	\$170	<input type="checkbox"/>	305 Murray Street, Perth	www.mantragroup.com.au
Citigate Perth	Standard Room	\$155	<input type="checkbox"/>	707 Wellington Street, Perth	www.mirvac.com.au
Travelodge Perth	Standard Room	\$152	<input type="checkbox"/>	417 Hay Street, Perth	www.toga.com.au

Rates are subject to change depending on availability at time of booking.

Other room types may be available so please enquire with the event consultant at Show Group.

Please indicate if you require a single, double or twin occupancy room -

Single

Double

Twin

Please indicate how many rooms are required - _____

GUEST NAME/S:

1. _____ 2. _____

3. _____ 4. _____

Check In Date: __ / ____ / **2010 Arrival Time: from 2pm** **Check Out Date:** __ / ____ / **2010 Departure Time: 11am**

Additional charges: Please check with your consultant at time of booking for late check out fees and any parking costs.

IMPORTANT NOTE: All bookings must be secured via a credit card to be denoted in the payment area below. The hotel reserves the right to charge for any late cancellations or no-shows. Fees will apply for any cancelled bookings. Please note accommodation is very limited during this period and all bookings are on a request basis only. Bookings should be requested by **Monday 4 October 2010** otherwise rooms may not be available.

FLIGHT REQUEST:

Should you require any air travel then please complete the below request and you will be sent a quote. If accepted then the sender will be required to confirm payment and a confirmation of the booking will be emailed to you. Please note that transaction fees apply.

Please tick box for preferred airline -

QANTAS

VIRGIN BLUE

JET STAR

Departure City _____ Date _____ Preferred Departure Time _____

Return City _____ Date _____ Preferred Departure Time _____

Frequent Flyer details _____

Business Class (Qantas only) Premium Economy (Virgin Blue only) Economy Class (Changeable) Best Fare of Day (Restricted)

ADDITIONAL REQUESTS:

If you would like to book any additional requests like car hire or limousine transfers then please email – craig.boyd@showgroup.com.au

CREDIT CARD AUTHORITY FOR ACCOMMODATION:

Please tick box - DEPOSIT or GUARANTEE FOR 3rd PARTY

I, _____ authorise Show Group and its suppliers to charge the stated amount on my credit card as outlined below and include my signature herewith for this authorisation. I also acknowledge that Show Group is not required to produce a copy of a signed and validated sales voucher to obtain payment.

Please tick box for card type -

AMEX

DINERS

VISA

MASTERCARD

Credit Card Number _____ Expiry Date _____

Amount Authorised AUD\$ _____ Signature: _____ Date / /

- Please note room only rates are quoted in AUD\$ and include GST and are subject to supplier change, availability and confirmation.
- Please note that credit card surcharges may apply.
- Upon receipt of this completed form Show Group will return email or fax the sender a confirmation.