REGISTRATION AND BOOKING FORM

New Zealand Adventure			Date of Trip		to
	Surname on Passport	First Name	D.O.B	Passport Number	Expiry Date
1					
	Flight Arrival			Flight Departure	
2					
	Flight Arrival			Flight Departure	
Home Ad	ddress				
City		PC Phone	e: ()	(Mob)	
E-Mail					
Emerger	ncy contact	Phone: ()		(Mob)	
Allergies	/Medical conditions/Fitness le	evels/Stuff we should kn	10W		
Refer Ov	er 70's or Serious Medical Is	sues Advice form			
	nsurance www.tid.com.au, or your no	mal insurance provide	ır.		
	t non-refundable deposit is requer due at least 1 month prior t		ring to secure yo	our place,	
Total O	wing \$ Depo	osit paid \$500 Rema	inder owing \$	Due/	/
Cash \$.	Cheque	Australian Accounts	\$		
Credit C	Card	E	кр/ ()	
Please de	Options a cheque/cash for \$ bit my credit card for \$ rd No	Exp / C\	vv		
Direct De Bank: AN Account	eposit: Please email through no IZ Bank Centre Rd Bentleigh B name: Gavin Hurleys Fly Fishi 1220 Account Number: 48933	otification if you use this ranch Swift ANZBAU3Ming World			
	e not included as part of HFFA p		anged via your tra	vel agent or by yourself.	

By completing this booking form once, you acknowledge you have read and accept the Terms and Conditions listed below and allow us to use this completed form as acknowledgement on all your future Hurley's Fly Fishing Adventures.