

## ACCOMMODATION BOOKING FORM

Reservation Name: \_\_\_\_\_

Reference: **Deakin University Graduation Ceremony**

Guest Mobile: \_\_\_\_\_

**Graduate Friends & Family Rate**

Guest Email: \_\_\_\_\_

Date of Function: **Between 15 – 23 April 2015**

### ACCOMMODATION DETAILS

Check In Date: \_\_\_\_\_

Check Out Date: \_\_\_\_\_

Number of nights: \_\_\_\_\_ ETA from 2pm: \_\_\_\_\_

Number of adults: \_\_\_\_\_ ETD before 10am: \_\_\_\_\_

**Room Type\*:** ☐ \$165.00 per Single Room, occupancy 1

☐ \$190.00 per Double Room, occupancy 2

☐ \$210.00 per Twin Room, occupancy 2

Sharing with \_\_\_\_\_

**\*All rate includes full breakfast served from 7am – 9am midweek**

Lifestyle Requirements / Comments: \_\_\_\_\_

### PAYMENT DETAILS

**Credit card payment is required at the time of booking to your confirm reservation**

Card Number: \_\_\_\_\_

Card Name: \_\_\_\_\_ Card Type: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CCV: \_\_\_\_\_

Payment of incidentals: ☐ Guest on check out ☐ Charge to the above credit card



**Phone:** 03 5227 3000 **Fax:** 03 5227 3101 **Email:** [client.services@deakin.edu.au](mailto:client.services@deakin.edu.au)

#### Office Use Only

Staff/Date:

Reservation #:

Package:

Rate Code:

Price Per night:

Room #

Total Stay:

GCCB ☐

RM ☐

PAID ☐

RECEIPT & CONFIRMATION SENT ☐