

**2020 AHA NSW STUDY TOUR****RUSSIA AND NORWAY****WEDNESDAY 16<sup>TH</sup> SEPTEMBER – MONDAY 28<sup>TH</sup> SEPTEMBER 2020**

Title (Mr/Mrs/Ms/Miss)	
First Name as per passport	
Last Name as per passport	
Company Name	
Position	
Business Street Address	
Suburb	
State	
Post Code	
Document Delivery Address (if different from above)	
Business Phone	
Mobile	
Email Address	
I authorise CCM Travel to distribute my contact details to the touring party	YES <input type="checkbox"/> NO <input type="checkbox"/>
Passport No.	
Passport Expiry Date <i>(your passport should have at least 6 months validity for travel)</i>	
Nationality on Passport	
Date of Birth	

Single or Twin Share Package	
Who will you be sharing with?	
Smoking / Non Smoking	
Qantas Frequent Flyer No.	
Dietary Requirements	
Are you interested in the Pre-Tour 4 night package to Istanbul & Gallipoli?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you require assistance with flights from Australia?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you wish to make travel arrangements outside the tour?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Travel Insurance required through CCM Travel?	QUOTE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

**Please complete the credit card information below for deposit of \$2,000.00 per person**

Name on Card	_____		
Credit Card Type:	Visa <input type="checkbox"/>	Mastercard <input type="checkbox"/>	Amex <input type="checkbox"/>
Credit Card Number	_____		EXP _____
CCV Number	_____		
Signature	_____		
<i>Merchant fees apply: Visa/MasterCard/Amex = 2%</i>			

Signature of Traveller : \_\_\_\_\_

Date: \_\_\_\_\_

Please scan and email your completed form to Catherine Mancuso at CCM Travel  
catherine@ccmtravel.com.au