



EVA EUROPEAN TOURS

CRUISE AND SPA
EUROPEAN TOUR

BOOKING FORM

Depart 25 May - 19 June 2019



PERSONAL DETAILS (Please Print)	FIRST TRAVELLER	SECOND TRAVELLER
Mr/Mrs/Ms/Miss/Mstr/Dr/Other		
Given names (as shown on Passport)		
Last name (as shown on passport)		
Passport No.		
Expiry date & Country of Issue (if other than Australia)		
Postal Address	STREET:	STREET:
	SUBURB: POSTCODE:	SUBURB: POSTCODE:
Phone No.		
Mobile No.		
Email Address		
Date of Birth		
Place of Birth		
Frequent Flyer Number		
Name of Contact in Australia		

ACCOMMODATION	Cruise Cabin Accommodation? (Twin Share includes cabin with Balcony) Preference for single travellers: <input type="checkbox"/> Inside <input type="checkbox"/> Ocean View <input type="checkbox"/> Balcony	What type of Room Accommodation do you require when staying on land? <input type="checkbox"/> Double Room <input type="checkbox"/> Twin Room <input type="checkbox"/> Single Room
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AIR TRAVEL REQUIRED	<input type="checkbox"/> Economy Class <input type="checkbox"/> Business Class	<input type="checkbox"/> Economy Class <input type="checkbox"/> Business Class
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TRAVEL INSURANCE	<p>We highly recommend that you purchase travel insurance. We are agents for SURESAVE Travel Insurance underwritten at Lloyd's (A+ rated by Standard & Poors).</p> <p>Would you like travel insurance? <input type="checkbox"/> YES please <input type="checkbox"/> NO thank you</p>
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BOOKING PAYMENT	To place your booking please email this completed form to: eva@spatours.com.au . Then post the completed form along with confirmation of deposit of \$2,000 per person to:	
	European Tours 8 / 337 New South Head Rd. Double Bay NSW 2028 Australia	EFT payments: WESTPAC BSB: 032188 ACCOUNT: 239369
	PLEASE NOTE: Credit Card payments will incur charges: 1 % Visa or Master Card / Amex 1.8%	

Signature: _____

FOR FURTHER INFORMATION

CALL: (02) 9327 4757

www.evaeuropeantours.com.au

email: eva@spatours.com.au