[ ]  Please give me a quote only. I will book later

[ ]  Please go ahead and make this booking

 Staff member details as per photo ID. Phone numbers are mandatory.

|  |  |
| --- | --- |
| **Date:** | 5-Sep-18 |
| **Surname:** |  | **Given names:** |  | **Title:** | Select |
| **Have you travelled before with Travel Crew?** | Select |
| **Home Phone:** |  | **Mobile Phone:** |  | **Ext:** |  |
| **Frequent Flyer Number:** |  | **Faculty/Department:** |  |  |
| **Does the traveler have a CQU MasterCard?**  | Select |
| **CQU MasterCard name, last 4 digits and expiry:**  |  |
| **Email Address for Tax Invoice:** |   |
| **Requested by:** |   | **Email:** |  | **Ext:**  |  |

**TRANSPORT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Depart from** | **Arrive at** | **Depart time** | **Travelling by** |
| Select | Full name of city | Full name of city |  | Select  |
| Select | Full name of city | Full name of city |  | Select  |
| Select | Full name of city | Full name of city |  | Select  |
| Select | Full name of city | Full name of city |  | SelectPlease select |
| Select | Full name of city | Full name of city |  | SelectPlease select |
| Select | Full name of city | Full name of city |  | Select |

|  |  |
| --- | --- |
| **Fare type:** | Select  |

**ACCOMMODATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Hotel** | **City** | **Date in** | **Date out** |
|  |  | Select | Select |
|  |  | Select | Select |
|  |  | Select | Select |

 Please complete only if traveler does not have a CQU Corporate Card:

 Room Only [ ]  Room & All Meals [ ]  Room & Breakfast [ ]  All Charges excluding mini bar [ ]

**RENTAL CAR**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of car:** | Select | **Other:** |  |
| **Pickup date:** | Select | **Time:** |  | **Pickup Point:** |  |
| **Drop off date:** | Select | **Time:** |  | **Drop off point:** |  |

|  |  |
| --- | --- |
| **Other travel requirements / requests:** |  |