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Level 1Commercial Centre

CQUniversity

Bruce Highway

North Rockhampton QLD 4701

Telephone: 07 4930 6396

International Travel: [internationaltravel@cqu.edu.au](mailto:internationaltravel@cqu.edu.au)

**CORPORATE CLIENT PROFILE**

**Please Note:** Details MUST be the same as shown on Passport

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PERSONAL DETAILS** | | | | |
| Title: |  | Gender: | | 🞏 Male 🞏 Female 🞏 … |
| First Name |  | Surname / Family Name: | |  |
| Work Phone: |  | Mobile Phone: | |  |
| Work Email: |  | | | |
| Personal Email:  (Only required for Jetstar bookings) |  | | | |
| Postcode of Residence: |  | | | |
| Department/Division: |  | | | |
| **CQUNIVERSITY CORPORATE CREDIT CARD** | | | | |
| Do you have a CQUniversity Corporate Credit Card? | | | | |
| YES  NO  Please note, if you have a Corporate Card you will be required to provide your card details prior to your first booking. | | | | |
| **YOUR MEMBERSHIP DETAILS - FREQUENT FLYER** | | | | |
| Airline: |  | | Frequent Flyer No.: |  |
| Airline: |  | | Frequent Flyer No.: |  |
| Airline: |  | | Frequent Flyer No.: |  |
| Car: |  | | Membership No.: |  |
| **INTERNATIONAL TRAVEL ONLY – PASSPORT DETAILS** | | | | |
| Country Issued: |  | | Passport No.: |  |
| Date of Issue: |  | | Expiry Date: |  |
| Date of Birth: |  | | | |
| Full Name (as per passport):  BLOCK LETTERS |  | | | |
| **PREFERENCES** | | | | |
| Special Meal Requirements: e.g. Diabetic, Celiac etc |  | | | |
| **ADDITIONAL INFORMATION:** | | | | |
|  | | | | |
| **ATTACHMENTS REQUIRED:** | | | | |
| Please provide a scanned copy of your passport to [internationaltravel@cqu.edu.au](mailto:internationaltravel@cqu.edu.au) prior to sending through your international travel booking request. | | | | |
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CQU Travel Centre Pty Ltd trading as “Travel Crew” ABN: 84 067 862 391 ATAS Accreditation No: A11480