

Travel Booking Request Form

To ensure your booking is processed quickly and efficiently, please assist your dedicated Phil Hoffmann Travel Consultant, by completing the following information:

Company:			
Booked By:		Date of Request:	

TRAVEL COORDINATOR DETAILS			
Name:			
Department:			
Email:		Direct Phone:	
Form of Payment:		Delivery Type:	
Delivery Address:			
Order No.:			

PASSENGER DETAILS (as per form of identification)			
Title:		Surname:	
First Name:			
Email:		Mobile:	
Office Phone:		Other Phone:	
Booking Type:	International:		Domestic:
Additional Travellers*:	Yes:		No:
Travel Insurance Required:	Yes:		No:

* Additional Information will be requested by your Travel Consultant

FLIGHT DETAILS						
Booking Class:						
From	To	Flight/Airline	Date	Dep	Arr	Fare Type
Frequent Flyer #:			Frequent Flyer #:			
Meal Request:			Seat Request:			

CAR RENTAL DETAILS						
Car Company:			Membership #:			
Special Request:						
Pick-Up Location	Date	Time	Drop-Off Location	Date	Time	Car Type
Payment: <i>Please select one of the two options:</i>						
Traveller to pay direct to Car Hire Company			Yes:		No:	
All Charges Back to Phil Hoffmann Travel			Yes:		No:	

ACCOMMODATION DETAILS						
Hotel Membership #:			Hotel Membership #:			
Special Requests:						
Hotel Name	City / Town	Check-in Date	Arrival Time	Check-out Date	Room Type	
Payment: <i>Please select one of the three options:</i>						
Room Charges Only - back to Phil Hoffmann Travel			Yes:		No:	
All Charges - back to Phil Hoffmann Travel			Yes:		No:	
Client to Pay Direct on Check-out			Yes:		No:	

ADDITIONAL BOOKING INFORMATION

Thank you for your co-operation.



www.phtcorporate.com.au

QUALITY – OUR LEADING EDGE

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