

GUEST INFORMATION FORM

This form needs to be completed by all travelling guests. Should multiple guests be travelling, please complete additional forms.

TOUR DETAILS

Name on Booking:

Journey Beyond Booking Reference:

For my reservation on, Departure Date:

PERSONAL INFORMATION

| Guest: Title: | First Name: | Last Name: | |
|---|-------------|---------------|--|
| Preferred Name: | | | |
| Residential Address: | | Suburb: | |
| State: | Postcode: | Mobile Phone: | |
| Medical Conditions: | | | |
| (e.g. allergies, CPAP machine or serious health issues) | | | |

Mobility:

(e.g. mobility restrictions or mobility aids. Guests are required to have a reasonable level of mobility to be able to board and alight the coach unaided. Due to space restrictions aboard our coaches, we are unable to accommodate passengers who require the use of wheelchairs or walkers. Our vehicles are not equipped with wheelchair ramps or lifters. Guests requiring physical or mental assistance must be accompanied by a companion who is willing and capable of providing such assistance.)

Dietary Requirements:*

*Please Note: Dietary Requirements include Gluten Free, Vegetarian or known allergies to food types. It is not a means by which to convey certain likes or dislikes with regard to diet. While Outback Spirit will convey dietary requirements to the necessary suppliers and accommodation properties, we cannot guarantee these requests, nor are we responsible for failures to meet these requirements. However, most accommodation properties are well versed in providing for people with special dietary needs.

Weight in kilograms (for scenic flights if applicable):

(Weight limits apply to all flights)

Emergency Contact, Name:

(Not travelling on tour)

Phone:

JOURNEY BEYOND



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Please return this completed form no later than 8 weeks prior to departure to Journey Beyond Rail Expeditions via email to jbholidays@journeybeyond.com or via mail to PO Box 445, Marleston Business Centre, Marleston SA 5033.

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