



Shortland Alpine Club
Co-operative Limited

ABN 42 791 472 128

Mulubinba Lodge
Perisher Valley
Kosciuszko National Park

Postal Address:
P O Box 5040
KAHIBAH NSW 2290

2018/2019 SUMMER BOOKING REQUEST Rev Oct 2018

FORWARD THIS SUMMER BOOKING REQUEST TO: GRAEME MCCULLOCH,
63 ELIZABETH ST, FLORAVILLE, NSW 2280 or gemac@idl.net.au

Name of Applicant:

Address:

StateP/Code Email:

Telephone: (Business) () Home ()

PAYMENT MUST BE PAID ELECTRONICALLY TO: Shortland Alpine Club Co-op Ltd (Accommodation Account)
BSB: 062834 Account Number: 10195464 Description: Your Name

- A copy of the bank receipt for the transfer must be attached to the booking form.
Remember to identify yourself on the transfer..... in the description.
Do NOT include your annual subscription in the accommodation payment.

READ THE BOOKING INFORMATION CAREFULLY.

BOOKINGS WILL NOT BE ACCEPTED WITHOUT FULL PAYMENT and SIGNED by a FINANCIAL MEMBER.

THE MEMBER IS RESPONSIBLE FOR COLLECTING HIS GROUP'S PAYMENTS AND FORWARDING THE TOTAL

- WEEKLY BOOKINGS ARE FROM NOON SUNDAY TO 10.00AM SUNDAY.
PLEASE USE SEPARATE BOOKING FORMS FOR EACH WEEK, AND FOR EACH PRIORITY GROUPING.
IF BOOKING FOR MORE THAN ONE WEEK INDICATE WHICH WEEK IS TO BE YOUR PRIORITY WEEK.
PART -WEEK BOOKINGS WILL BE ALLOCATED A FORTNIGHT BEFORE THE REQUESTED DATES

ACCOMMODATION REQUESTED: (Priority week) from / / to / / OR ALTERNATIVELY

from / / to / / OR / / to / /

NAMES OF ALL PERSONS IN GROUP:-

Table with 7 columns: Family Name, Given Name, Age#, M or F, Status##, Fee. Includes rows 1-6 and a TOTAL row.

Ages of children or dependent students as at 1st June, THIS YEAR.

Under STATUS, please indicate whether Member (M), Member's spouse (S), Member's guest (MG), Member's child or dependent student (MC), SAC Senior (SS), SAC Senior's Spouse (SSS), SAC Senior's Non-Member Child (SSC), Affiliate (Member's family list) (A), Visitor (V), Visitor's child (VC).

In signing this form I, the applicant, having PAID my ANNUAL FEES will accept responsibility for ensuring that all persons in the group will conform to any reasonable request by the Lodge Captain and will abide by the bylaws and rules for the Club.

MEMBERS SPONSORING VISITORS, PLEASE READ WINTER BOOKING INFORMATION ENCLOSED.

Signature of Applicant: Date of Application:

Signature of Member: Print Member's Name:

CLUB USE: Date of receipt: Amount: \$ [Electronic Payment]
Confirmed: Financial Member:
Cancelled: Week Allocated:
Refund Confirmed: [Lodge Captain]