



Shortland Alpine Club Co-operative Limited

ABN 42 791 472 128

Mulubinba Lodge, Kosciuszko National Park
69 Porcupine Rd Perisher Valley NSW 2624

BOOKING REQUEST APPLICATION FORM

Name of Applicant:

Address:

Email:

Mobile Phone No.:

Emergency Contact

Phone No.

Member, SAC Senior or Affiliate's name vouching for unaccompanied Visitors:

Accommodation Requested

- | | | | | | |
|----|-------------------------|----|----------|-----|----|
| 1. | From | To | Priority | YES | NO |
| | Or Alternatively | | | | |
| 2. | From | To | | | |
| | Or Alternatively | | | | |
| 3. | From | To | | | |

Group Members

Family Name	Given Name	Age	M or F	Status	Fee \$
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I acknowledge and accept that I have read the Accommodation Bookings and Cancellation Rules of the Shortland Alpine Club

TOTAL COST \$

Have you: (Tick the check-boxes below)

PAID YOUR ANNUAL SUBSCRIPTIONS

ATTACHED A COPY OF THE BANK RECEIPT FOR THE BOOKING AMOUNT

HAVE ALL GUESTS COMPLETED THE COVID WAIVER FORM

BOOKINGS MUST BE EMAILED TO THE BOOKING OFFICER AND WILL NOT BE ACCEPTED WITHOUT FULL PAYMENT

PAYMENT MUST BE PAID ELECTRONICALLY TO:
Shortland Alpine Club Co-op Ltd (Accommodation Account)
BSB: 062834
Account Number: 10016884
Description: Your Name

To electronically forward this request to the Booking Officer:

1. Save the document;
2. Click on the link: Bookings@mulubinba.com.au
3. Attach form by clicking on 'insert' then 'Files' then select saved document;
4. Then click on > Send.

Office Use Only

Confirmed:

Refund:

Lodge Captain: