



## SKI STAFF BOOKING AGREEMENT FORM

**A \$100 per person non-refundable deposit is required in order to process your booking. A 1.5% merchant fee will be charged to all credit card payments.**

**A BOOKING CANNOT BE MADE UNTIL THIS FORM IS COMPLETED, RETURNED AND SIGNED.**

Passenger names: MR/MRS/MS Surname: \_\_\_\_\_ First Name: \_\_\_\_\_  
 (as per passport)

MR/MRS/MS Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Departure from Australia: \_\_\_\_\_ Depart From: \_\_\_\_\_ Final Destination: \_\_\_\_\_ Return Date: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact No.'s: (M): \_\_\_\_\_ (H): \_\_\_\_\_ (W): \_\_\_\_\_ (Fax): \_\_\_\_\_

**\*\*\* We highly recommend TRAVEL INSURANCE \*\*\***

Please tick one :  Accept  
 Decline

Signature: \_\_\_\_\_

*Nb: Travel insurance can be purchased through our ski staff insurance link. Please forward a copy of your policy to us to receive a \$50 discount off your airfare. This MUST be done prior to final payment as no refunds will be issued after ticketing. Insurance link: <http://www.suresave.net.au/home.php?bundle=26&affid=764>*

By signing the above, I understand and agree to the responsibilities, Terms and Skimax Qantas booking conditions and I acknowledge that it was highly recommended that I purchase travel insurance to protect against unforeseen circumstances. I agree that all names are correct as per passport and understand that a \$22 fee will be charged to change ticket after issue if incorrectly spelt. Complete name changes are not permitted.

### PAYING DEPOSIT BY CREDIT CARD

Authorised amount to charge: AUD\$ \_\_\_\_\_

Credit Card Type: (please circle one)      Mastercard      Visa      American Express      Diners

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name printed as it appears on Credit Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing the Credit Card Authorisation above, I authorise Skimax Qantas to charge the specified Credit\_Card for the amount specified plus an additional 1.5% fee credit card fee to authorised amount if not already included.

**PLEASE RETURN THE COMPLETED FORM TO SKIMAX QANTAS,  
Level 3, 263 Clarence Street, Sydney NSW 2000. Tel: 02-9267 1655 Fax: 02-9267 1644**

Booking/Quote No: \_\_\_\_\_ Consultant: \_\_\_\_\_



**TRAVEL DOCUMENTS WILL NOT BE RELEASED UNTIL THIS FORM IS COMPLETED BY ALL PARTICIPANTS AND RETURNED TO SKIMAX WITH CONFIRMATION OF OVERSEAS EMPLOYMENT**

**NAMES :**

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**Referred by:**

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**In which Australian Resort did you work the past season?**

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**What position did you hold there?**

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**What overseas resort will you be working in?**

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**What position will you hold there?**

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**\*\*\* IMPORTANT \*\*\***

**PLEASE ATTACH A COPY OF YOUR EMPLOYMENT LETTER OR INSTRUCTORS CERTIFICATE.**