

BOOKING APPLICATION

Guest Contact Details (Primary Contact)

Last Name	First Name	
0 -1 -1		
Address		
Contact Email		
Contact Phone 1	Contact Phone 2	

Recommending Member Details (If Guest above is not a member)

Last Name	First Name	
Contact Email		
Contact Phone 1	Contact Phone 2	

Booking Details

Arrival Date		Departure Date	Total Nights	
List other guests you wish to stay with				

Guest List

	Last Name, First Name	Age (if < 25)	Guest Status (Member, Concession, Non-member)	Room Type (Twin/Double)	Tariff
Room					
				Total Tariff	

All booking applications should be sent to bookings@karralika.com. Please await confirmation of your application from the booking secretary before making payment.

Applications can also be sent to the postal address above and should be accompanied by a cheque for the Total Tariff amount.

Please submit multiple forms where required.

By submitting this form, you agree to abide by the House Rules of Karralika Ski Club whilst resident in the lodge and be responsible for the above-named guests. Where this application is submitted by a non-member, the recommending member assumes this responsibility.