#### RESERVATIONS

#### OFFICE HOURS

|  |  |
| --- | --- |
| CONTACT CENTRE:Monday to Friday 07:30-17:00Saturdays & Public Holidays 08:00 – 13:00Sunday: Closed | SPECIALISED & RES FINANCE:Monday to Friday 07:30-16:00Saturday Sunday & Public Holidays ClosedCOUNTER: Monday to Friday 07:30-15:45 |

## **APPLICATION FOR THE USE OF OUR FACILITIES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Client code:** | | | **ID/Passport:** | | | **Birth Date:** |
| **Surname:** | | | | **Initials:** | | **Title:** |
| **Postal address:** | | | | **Language:** | | |
|  | | | | **Citizenship:** | | |
|  | | | | **Postal code:** | | |
| **Country:** | | | | **E-mail Address:** | | |
| **Phone** | **Code** | **Number** | | | **Ext.** | |
| Home |  |  | | |  | |
| **Business** |  |  | | |  | |
| Fax |  |  | | | **Cell:** | |
| E-mail |  | | | | | |

Clients who have not yet registered with us (e.g. a permanent client number has not been allocated to you yet), who are S.A. citizens (or persons with a permanent residential permit) – 60 years and older, please include certified photocopy of I/D document to enable us to update our client data.

#### RESERVATION REQUIRED

**Number of persons**: Adults Children Babies

(12 years and older) (Under 12 yrs. of age at (under 2 yrs. of age at

time of intended visit) time of intended visit)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Park/Camp | Arrive | Depart | Nights | Type of facility | Description |
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**Any other information for the attention of the reservation clerk:**

|  |  |
| --- | --- |
| **Reference number:** | |
|  | |
|  | |
| Signature: | Date: |