| Booking Form | |
|--|--|
| FIRST NAME | LAST NAME |
| ADDRESS | |
| SUBURB | STATE |
| POSTCODE | COUNTRY |
| MOBILE | PHONE |
| EMAIL ADDRESS | |
| FOOD ALLERGIES | MEDICAL CONDITION |
| SPECIAL REQUIREMENTS | |
| EMERGENCY CONTACT | PHONE |
| TRIP DETAILS | |
| TRIP DATE | TRIP LOCATION |
| BODY WEIGHT FOR CHARTER FLIGHT | Kg TRIP CO-ORDINATOR IF APPLICABLE |
| PREFERRED FISHING STYLES POPPER FISHING JIGGING OPTIONAL EXTRAS WILL YOU BE USING OUR OUT Light Outfit Medium Outfit Heavy Outfit Jigging Outfit Trolling Outfit Please note, fly fishing outfits are not provi | Tackle not provided TFITS? ARE YOU BRINGING YOUR OWN RODS & REELS? If yes, please list & we can check if appropriate: |
| SIGNED | DATE |
| conditions contained in the Nomad Spo agree to the safety and liability clause, f information booklet. I agree to the ager Sport Fishing to share my personal deta | orm, I formally declare that I have read and FULLY understand and agree to all of the details, terms and rtfishing/Far North Sports Fishing information booklet. I agree to all of the safety requirements, and fuel levy, fishing conditions and deposit, payment & trip cancellation conditions contained in the ncy clause contained in the information booklet. I also agree to allow Nomad Sportfishing and Far North ils with the transfer companies that will be used for transfers to and from the mothership, and if Authorities. I acknowledge that I will take out travel insurance to cover full cancellation value of the |
| DEPOSIT PAYMENT DETAILS | |
| <u> </u> | /ISA Debit/Prepaid MASTERCARD Credit MASTERCARD Debit/Prepaid .2% surcharge) (1.2% surcharge) (1.2% surcharge) |
| CARD NUMBER | EXPIRY DATE |
| NAME ON CARD | SECURITY CODE |
| DIRECT BSB 014 6 DEPOSIT BANK AND | 1 3 |

Please use your invoice number as the reference when transferring your payment. You will be required to settle all international transfer fees if applicable.

Please contact your bank regarding transfer fees if applicable.