Attention:	Fax No.:	Date: /	/ 2002
ACCITIOIT.	I UX IVO	Duto.	, 2002

Please send the completed form via fax to 6251 7688.





BOOKING FORM

PASSENGERS' NAME - AS IN PASSPORT (Please underline Surname)

Treserve traine to the transfer of the following container						
No	Full Name (Please Indicate Child's Age)	No.	Full Name (Please Indicate Child's Age)			
1.	Mr/Ms/Mstr	3.	Mr/Ms/Mstr			
2.	Mr/Ms/Mstr	4.	Mr/Ms/Mstr			

FLIGHT PREFERENCES (Please refer to Flight Schedule list at Page 2 and Page 3)

Destination	1st Choice		2nd C	Choice	3rd Choice	
	Date	Flight No.	Date	Flight No.	Date	Flight No.

TERMS & CONDITIONS

- Booking Period: 20 April 2002 21 April 2002. Travel Period: 21 April 2002 31 July 2002 (ex-SIN).
- Waitlist not allowed.
- Child fare: 75% of adult fare. No infant fare.
- Min stay: 3 nights, Max stay: 60 days for Economy Class to Australia except Perth, Min stay: 2 nights. Min stay: 3 nights, Max stay: 2 months for FRA, LON and UK points.
- Pay and collect tickets by 21 April 2002.
- Stopover permitted in Frankfurt.
- Open jaw permitted in UK.
- Fares exclude taxes and NATAS recommended service fee of S\$40.00 per ticket for travel to Australia and S\$60.00 per ticket for travel to Europe.
- Flight / Date change permitted subject to seat availability. A S\$75.00 amendment fee will be charged for any amendment made.
- Peak season surcharge of S\$50.00 for travel to Perth or Sydney between 1 June 2002 16 June 2002.
- Peak season surcharge, partially utilized / unutilized tickets and all taxes are strictly non-refundable.
- Please ensure that your passport has at least six (6) months validity.
- To apply for Australia visa, a service fee of S\$5.00 per passenger will be charged.
- Unisure travel insurance available at 10% discount when purchased. Please request for a copy of application form from staff.

CUSTOMER'S ACKNOWLEDGEMENT

By sending this form back by fax, I agree to be bound by the UOB Travel Planners Pte Ltd's Booking Terms & Conditions. I hereby authorize UOB Travel Planners Pte Ltd to charge my **UOB/OUB credit card**. I confirm that all information given in this application is true and accurate.

Cardholder's Name: Ca			ardholder's Signature:						
Credit Card No.:			Expiry	Date:	1				
Contact Person:		_ Home No.:	6		_ Hp No.:	9			
Email:		_ Office No.:	6		_ Fax	_6			
Address (Home/Office):								
For Official Use Only									
Booking Handle By:		Dire	ct No.:	6359 31					
Booking Status:	Confirmed / Being Processed	Date) :	/	/ 2002				