**TUI MEDICAL Waikato International**

**Flight Details Form**

Please complete and email this form to events@waikatobadminton.co.nz no later than

**Tuesday 25 July 2017. Requests after this date will not be accepted**

|  |
| --- |
| Name of Member Association:  |
| Contact Person:  |
| PHONE NUMBER:  | MOBILE NUMBER:  |
| E-MAIL:  |

|  |  |  |
| --- | --- | --- |
| **Group 1** | **ARRIVAL** | **DEPARTURE** |
| Day/Date |  |  |
| Time |  |  |
| Airline: |  |  |
| Flight No. |  |  |
| Total no. of people |  |  |
| Name of Group Leader |  |  |
| Hotel Staying At: |  |

|  |  |  |
| --- | --- | --- |
| **Group 2** (if applicable) | **ARRIVAL** | **DEPARTURE** |
| Day/Date |  |  |
| Time |  |  |
| Airline: |  |  |
| Flight No. |  |  |
| Total no. of people |  |  |
| Name of Group Leader |  |  |
| Hotel Staying At: |  |  |

**Practice Courts can be booked ahead of arrival for Monday 7 and Tuesday 8 July 2017 at the main venue – Eastlink Badminton Stadium.**

**Practice Court Request Form**

**Courts may also be booked upon arrival.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Times Preferred**  | **No of Courts** | **No of Players** |
| **Tuesday 14 March** |  |  |  |
| **Wednesday 15 March** |  |  |  |