

CORPORATE CLUB MEMBERSHIP FORM

PLEASE COMPLETE AND RETURN TO EITHER: reservations@lanaiapartments.com.au or fax: (07) 4957 4402

COMPANY NAME:

BUSINESS TYPE:

CONTACT NUMBER:

EMAIL ADDRESS:

POSTAL ADDRESS:

If you would like us to keep your payment details on file, for all bookings made at Lanai Riverside Apartments please complete the section below. The details will be stored securely and can only be used by the authorised personnel you specify.

The credit card below covers the following charges * **please tick as appropriate** *

Accommodation Only Accommodation and Meals Only Security Only (I acknowledge that this covers your cancellation policy) All Charges

Card number:

Expiry Date:/..... CCV:

Name on Card: Signature:

On behalf of the above company I hereby state that the particulars shown are correct. I herewith make application for Lanai Riverside Apartments Corporate Club.

Signature: Date:

Personnel authorized to make bookings on behalf of our company are:

1. Name: Signature:

2. Name: Signature:

3. Name: Signature:

OFFICE USE.
MEMBER #