## Arrival Booking Form

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| Contact details |
| National federation: |  |
| No. of people in the team: |  |
| Team manager:  |  |
| E-mail address:  |  |
| Mobile number: |  |

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| Arrival details |
| Arrival date:  |  | Arrival time:  |  |
| Flight number: |  | Terminal: |  |
| No. of people on the flight: |  | No. of oars on the flight: |  |
| No. of wheelchair users on the flight: |  | Final destination of the journey /hotel or venue/ |  |
| Mobile number of a person travelling with the group:  |
| Arrival date & unloading of the boat trailer:  |

**Additional form to be filled only if additional groups or individuals would be arriving apart from the rest of the team!**

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| Arrival details |
| Arrival date:  |  | Arrival time:  |  |
| Flight number: |  | Terminal: |  |
| No. of people on the flight: |  | No. of oars on the flight: |  |
| No. of wheelchair users on the flight: |  | Final destination of the journey /hotel or venue/: |  |
| Mobile number of a person travelling with the group:  |

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| Vehicles’ parking permits (if applicable) |
| Brand, model and registration number of Team’s private vehicle  |  |
| Brand, model, registration number of boat trailer towing vehicle |   |

**Please fill in the departure details on the next page!**

**Departure Booking Form**

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| Departure details |
| Departure date:  |  | Departure(flight) time:  |  |
| Flight number: |  | Terminal: |  |
| No. of people on the flight: |  | No. of oars on the flight: |  |
| No. of wheelchair users on the flight:  |  |  |  |
| Mobile number of a person travelling with the group:  |
| Date & time for loading of the boat trailer: |

**Additional form to be filled only if additional groups or individuals would be departing apart from the rest of the team!**

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| Departure details |
| Departure date:  |  | Departure(flight) time:  |  |
| Flight number: |  | Terminal: |  |
| No of people on the flight: |  | No of oars on the flight: |  |
| No of wheelchair users on the flight:  |  |  |  |
| Mobile number of a person travelling with the group:  |

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| Any remarks or additional comments: |
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