

STUDY TOUR BOOKING REQUEST

Group Name					
Destination					
Expected arrival date (or month if not confirmed)					
Expected departure date (or month if not confirmed)					
Education Provider					
Agent Name					
Length of Stay					
Placement type Please tick one option for your tour.	Single (1 student per h	ome)		rivate nt per room)	Shared (more than 1 student per room)
Number of Guests	Stud	dents			Teachers
Males					
Females					
Age Group of Students					
Students' English Level					
Nationality					
Placement Confirmation Required By (enter date)					
Essentials					
Essentials What meals are required? Please tick of	one option below	for your	tour.	_	
		Opti	on 2	ast, Lunch, D	Dinner)
What meals are required? <i>Please tick</i> of Option 1	n weekends	Option 3 meals	on 2	ast, Lunch, D	Dinner)
What meals are required? Please tick of Option 1 2 meals Monday to Friday & 3 meals or Do students require daily transport to a	n weekends nd from the Edu	Option Option	on 2 (Breakfa	1 [
Option 1 2 meals Monday to Friday & 3 meals or Do students require daily transport to a Provider? Do students require homestay for meet transport? How many students per homestay?	n weekends nd from the Edu and greet and d	Option 3 meals cation	on 2 (Breakfa	Yes [No
Option 1 2 meals Monday to Friday & 3 meals or Do students require daily transport to a Provider? Do students require homestay for meet transport?	n weekends nd from the Edu and greet and d	Option 3 meals cation	on 2 (Breakfa	Yes [Yes [Number of	No No Are separate
Option 1 2 meals Monday to Friday & 3 meals or Do students require daily transport to a Provider? Do students require homestay for meet transport? How many students per homestay?	n weekends nd from the Edu and greet and d	Option 3 meals cation	on 2 (Breakfa	Yes [Yes [Number of	No Are separate rooms required?
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Working together to build complete homestay solutions