STUDY MEMBER BOOKING FORM – INTERNATIONAL

DMHDS

PLEASE RETURN THIS FORM IN THE ENVELOPE PROVIDED AS SOON AS POSSIBLE

PLEASE PRINT CLEARLY

Full Name: _____ STUDY ID NO. (if known) _____
[Exactly as it appears on your passport]

Passport Number: _____ If not NZ passport , please specify Country of issue: _____

Expiry Date: _____

IT IS ESSENTIAL TO HAVE 6 MONTHS VALIDITY ON YOUR PASSPORT AT TIME OF TRAVEL.
Please also make sure your entry and re-entry documentation is valid

Current Address:

Delivery Address for travel documents if different:

Phone (Work): _____ Cellphone: _____

Phone (Home): _____ Email: _____

Phone No. prior to flight (the night before): _____

PREFERRED DATE OF APPOINTMENT

DAY/DATE _____

MONTH _____

YEAR _____

ALTERNATIVE DATE OF APPOINTMENT

DAY/DATE _____

MONTH _____

YEAR _____

IF YOU ARE PARENTING A TEENAGER TURNING 15 OR 16 DURING THE AGE 38 ASSESSMENT PHASE, DO YOU WISH TO COMBINE ATTENDANCE FOR THE NEXT GENERATION STUDY WITH YOUR PHASE 38 ASSESSMENT? YES ☐ NO ☐

WILL YOU REQUIRE A CAR PARK AT THE UNIT? YES ☐ NO ☐

ACCOMMODATION:

DO YOU WANT US TO ARRANGE ACCOMMODATION FOR YOU IN DUNEDIN? YES ☐ NO ☐

Date In: _____

Date Out: _____

No. Adults ☐ No. Children ☐ Number of Extra Nights required ☐

We will pay for dinner, breakfast and accommodation for up to three nights as necessary for the Study member. Depending on the room configuration available, it may be possible to accommodate 1-2 extra family members accompanying you in the room at no extra cost but they will have to pay for meals. Otherwise, we may require payment of the difference between the rate for a standard room and a larger room(s). If you wish to stay longer at your own expense, the special room and meal rates will apply for the duration of your stay (subject to availability). We are happy to try and arrange this.

FOR OFFICE USE ONLY:

Diary (Date entered): _____ Letter Sent (Date): _____

Paradox (Date entered): _____

TRAVEL/FLIGHT DETAILS REQUIRED

ARRIVAL IN DUNEDIN:

FROM (COUNTRY): _____ AIRPORT: _____

DATE OF TRAVEL: _____ TIME (AM OR PM)? _____

SPECIAL REQUIREMENTS (eg dietary requirements): _____

DEPARTURE FROM DUNEDIN:

TO (COUNTRY): _____ AIRPORT: _____

DATE OF TRAVEL: _____

SPECIAL REQUIREMENTS (eg dietary requirements): _____

DO YOU HAVE ANY AIRLINE REWARD MEMBERSHIPS? YES ☐ NO ☐

IF YES: AIRLINE: _____ MEMBERSHIP NUMBER: _____

DO YOU WISH A BOOKING TO BE MADE FOR YOUR PARTNER? YES ☐ NO ☐

Partner's Full Name as appears on passport: _____

Passport Number: _____ Country of issue if not NZ passport: _____

Expiry Date: _____

DOES YOUR PARTNER HAVE ANY AIRLINE REWARD MEMBERSHIPS? YES ☐ NO ☐

IF YES: AIRLINE: MEMBERSHIP NUMBER:

PAYMENT DETAILS FOR PARTNER (Visa, Bankcard etc) _____

DO YOU WISH A BOOKING TO BE MADE FOR ANY CHILDREN? YES ☐ NO ☐

IF YES:	Full Name of Child as appears on passport	DOB	Gender	
1.			Male ☐	Female ☐
2.			Male ☐	Female ☐
3.			Male ☐	Female ☐

Child	Passport Number	Expiry Date	Country of issue if not NZ passport:
1.			
2.			
3.			

PAYMENT DETAILS FOR CHILDREN (Visa, Bankcard etc) _____

WILL YOU REQUIRE CHILDCARE AT OUR ON-SITE PLAYROOM? YES ☐ NO ☐

(Usually available on Fridays)

DO YOUR CHILDREN HAVE SPECIAL REQUIREMENTS (eg food, sleep, routines, medication)? Please specify:

_____

_____