



BOOKING

Agency Name:

Contact:

DESTINATION:

Name:

Date of Birth:

Gender:

PROFESSIONAL INTERNSHIP

Area of Interest:

N° of Weeks:

Start Date (approximate):

End Date (approximate):

ACCOMMODATION I

Type of Accommodation:

Room:

Meals:

Start Date:

End Date:

ACCOMMODATION II

Type of Accommodation:

Room:



Meals:

Start Date:

End Date:

TRANSFER (YES/NO)

Arrival Information:

Flight:

Date/Time:

Travel Insurance: