

Expedition 317

Itinerary Information / Request For Hotel Reservations

Please complete the following information.

Hotel reservations CANNOT be confirmed unless this information is provided.

Arriving Flight In Townsville

Date: _____ Flight Number: _____ Time: _____

Please confirm hotel reservations in Townsville

Hotel: Jupiters Hotel and Casino

Check In: _____ (date) Check Out: _____ (date)

**The rooming list for the above reservation will be sent to the hotel on
Oct. 1, 2009**

If you require a reservation we must receive your request by that date.

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INDICATE IF YOU WILL NEED A HOTEL RESERVATION AT THE END OF THE
EXPEDITION.

Please confirm hotel reservations in Wellington

Hotel: James Cook Hotel Grand Chancellor

Check In: _____ (date) Check Out: _____ (date)

Departing Flight from Wellington

Date: _____ Flight Number: _____ Time: _____

Credit Card Information (required to guarantee the reservation)

Name as Listed on Card _____ Expiration Date _____

Number _____ Type (MasterCard, etc.) _____

FORM MAY BE FAXED TO (979) 845-0293
OR EMAILED: deshetler@iodp.tamu.edu