Group Travel Request Form												
* Denotes N	Mandatory information		reni	nies	BCD.	travel				MANOR	WINNER W1022	
	Group Cordinator Information									Africa	a's Leading Travel Management Company	
	First name *	1				Last name*					l	
	Email Address	1				· I	-				1	
	Cellphone Number	ī				, 					ĺ	
7	Flight Request											
Date		From		То		Departure Time	e Class of Tra	avel	Number of Trav	vellers		
				<del>                                     </del>								
Special red	quest :											
â	Hotel Request											
City	Country				Hotel			Arrival	Date	Depart	ture date	
		-						1				
Special red	quest :											
<del>(</del>	Car Rental / Transfers											
Pickup location			Date		Time	Drop off Location	rop off Location		Date		Time	
			_					_				
Special request :												
8	Requirements Check List		VEC									
Visa/s requ	uired		YES	1	NO							
Passport (v	valid for at least six months)		]									
Travel insu	urance Required			1								
8	Additional Services											
Add Comi	ment / detail for additional services (f	ree text)										
	BCD Groups Travel avel Request form to GroupsBTC@Re	enniesBCDTrav	/el.com									
	ffice contact numbers: 087 110 1149											