

APPLICATION FOR RESERVATION



Last name: First names:

Address:

Telephone: (HOME) (BUS) (MOBILE)

Facsimile: Email:

Preferred site: Ocean Harbour Pilot Cabin
 Onsite caravan

Dates requested: Arrival Departure

Alternative dates: Arrival Departure

Note: If your choices of sites and dates are not available, an alternative may be offered for your consideration.

Number of occupants: Adults Children

Caravan: Length Width

Awning: Length Width

Tent (including awning): Length Width

Customer history and comments:

Signature: Date:

Note: A deposit is not required with this request. When allocations have been completed a confirmation letter will be sent if your request is successful. Information provided on this application form may be used for Tauranga City Council customer survey information and for camp security purposes (Privacy Act 1993).

OFFICE USE:

Site No:

Dates: (to)

Deposit request sent:

Deposit due:

Deposit paid:

Freephone: 0800 682 3224
0800 MTBEACH

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