



DINOSAURCOAST
MANAGEMENT GROUP

ABN 64 562 730 699

PO Box 2478
Broome WA 6725
dinosaurcmg@gmail.com

SCHOOL EXCURSION – BOOKING FORM

SCHOOL OR ORGANISATION:

Postal Address:

CONTACT FOR ALL BOOKING AND INVOICE matters

Name:

Email:

TEACHER LEADING THE EXCURSION:

Name:

Mobile Phone:

EXCURSION DETAILS

Excursion dates / time:

Participants:

Number of Students	Age of Students	Number of Other Paying Participants (Teachers free)

PAYMENT OF INVOICES

Payment is required prior to the date of the excursion.

To: Dinosaur Coast Management Group Inc. BSB: 066-505 Account Number: 10512115

Email completed form to: dinosaurcmg@gmail.com

Thanks 