



Document 3: Trail Reservation Form

Address & Contact Details: Groups Contact Person					Client: Code:		
Surname:			Initials:		Title:		
Postal Address							
Physical Address							
Citizenship		Home Language		I can speak and understand English?			
Email							
Contact Numbers							
Home		Work	Fax		When travelling		
RESERVATION REQUIRED					Documents to be attached		
	Name	Initials	Female/ Male	Age	ID	Personal/ Medical info	Indemnity Form
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Date options for the walk

*** Inquire about somewhat different accommodation arrangements for these dates!**

2019: November – 16/17

December 15/16 & 29/30

2020: January 19/20

February 7/8 & 21/22

March 8/9 & 21/22

April 6/7 & 21/22

May 6/7 & 21/22

June 4/5 & 19/20

July 3/ 4

We require accommodation in Yzerfontein after/before the hike dates: Yes / No.....

Establishment of choice on www.yzerfonteinaccommodation.co.za

Number of guests	Name / Surname	Contact Details

Arrival Date: _____ Departure Date: _____

Any other information for the attention of the reservation office:

Signature of Hiker

Date



Contact: 083 453 2336 | My16mile@yzerfonteinaccommodation.co.za