**BOOKING FORM FOR KINGS MILL ACCOMMODATION**

.

**NAME** ………………………………………………………………………………………

**DATE OF BIRTH**…………………………………………………………………………..

**NATIONAL INSURANCE No** …………………………….

**FORWARDING ADDRESS**

…………………………………………………………………………………………………

**NEXT OF KIN** ........................................................................................................................

**MOBILE NUMBER** ……………………………………………………………………...

**EMAIL**……………………………………………………………………………………….

**ARRIVAL DATE**……………………………………………………………………………

**LEAVE DATE**……………………………………………………………………………….

**DEPARTMENT AT KINGS MILL**…………………………………………………………

**AGENCY NAME AND CONTACT No** …………………………………………………….

**AGENCY TO PAY** YES / NO