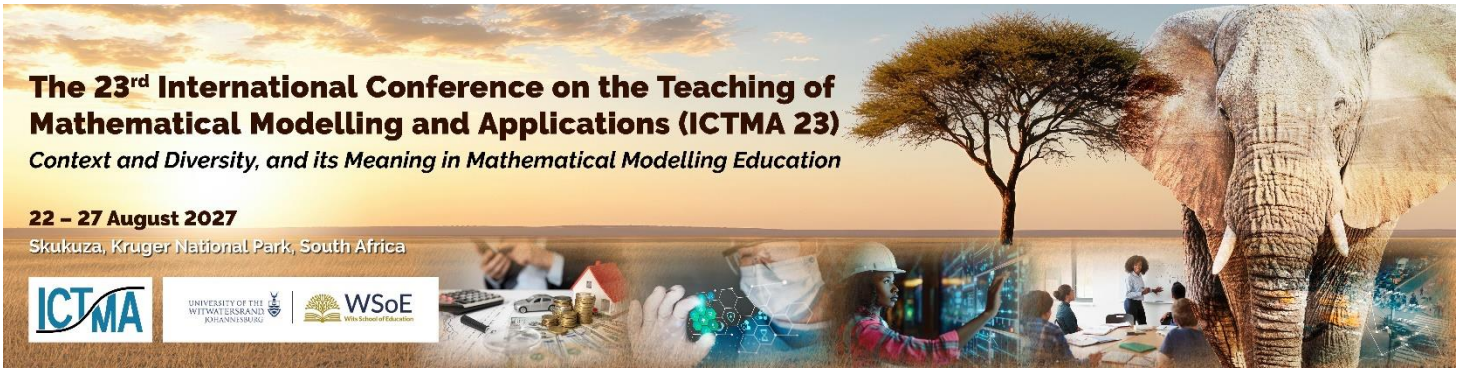

ACCOMMODATION FORM

Please complete this form to make a reservation for accommodation at Skukuza Safari Lodge - The lodge will respond to you directly with further information and an invoice.

Main Guest Information	
Full Name and Surname as per ID/passport:	
E-mail address:	
Mobile Contact number incl country code:	
Nationality (for calculation of conservation fees)	
Room requirements	Yes / No / state option
Single room	
Sharing room Name of the person sharing with you (incl nationality)	
Is the person sharing with you a **delegate** to the conference or **accompanying person**	
Additional room requirements (interleading room for family)	
Accommodation details	e.g. Sunday 22 August 2027
Check-in day and date at accommodation:	
Check-out day and date at accommodation:	
Total number of nights	
Invoicing details	
Invoicing details: Company name Address VAT number (if applicable)	
Please provide any additional information that we should be aware of:	
Any disabilities:	
Will you require a shuttle from Skukuza Airport? Yes/No	
Date that this form is completed and submitted	

Email to: aha Central Reservations Office cro@aha.co.za, copy to ictma23@carlamani.com to assist with follow-up where required.