

GROUP QUOTATION REQUEST FORM

DATE REQUEST WAS RECEIVED

LOCATION BRISBANE GOLD COAST

GROUP NAME

START DATE

FINISH DATE

NUMBER OF STUDENTS

NUMBER OF GROUP LEADERS

AGE RANGE OF STUDENTS

ACCOMMODATION

FAMILY HOMESTAY

- SINGLE PLACEMENT
- DOUBLE PLACEMENT
- TRIPLE PLACEMENT
- HOTEL FOR GROUP LEADERS
- HOMESTAY FOR GROUP LEADERS

MEALS

- HALF BOARD (Breakfast and Dinner every day, lunches on Saturday and Sunday)
- FULL BOARD (Breakfast, Lunch and Dinner each day)

TRANSPORTATION

- AIRPORT PICKUP AND RETURN
- GO CARDS REQUIRED FOR STUDENTS
- GO CARDS REQUIRED FOR STUDENTS AND GROUP LEADERS
- DAILY TRANSPORT REQUIRED TO AND FROM COLLEGE (This is subject to availability)

ACTIVITIES

- NUMBER OF WEEKDAY ACTIVITIES
- NUMBER OF FULL DAY ACTIVITIES

CLASSES

- PART TIME (3 HRS PER DAY) FULL TIME (4 HRS PER DAY)
- CLOSED CLASSES INTEGRATED UFO ENGLISH

SPECIAL REQUESTS

NAME OF AGENCY REQUESTING QUOTATION

NAME OF CONTACT PERSON

EMAIL OF CONTACT PERSON

PHONE NUMBER OF CONTACT PERSON

Please save and send the completed form to Christine Stewart at christine.stewart@langports.com.