

**Grampians Health Ballarat - Accommodation Department**

Could you please fill in the following information for our records and email to bhsaccommodation@bhs.org.au

**Name: …………………………………………………………………**

**Address: …………………………………………………………………**

 **…………………………………………………………………**

**Mobile: …………………………………………**

**Email: …………………………………………**

**Gender: …………………… To assist in allocating accommodation.**

**Department / Placement: ………………………………………………….**

**University: ………………………………………………………………….**

**Dates of Stay: ………………………. To ……………………….**

**Please Note:**

**There will be a cancellation fee of $100.00.**

**Please sign and return as soon as possible to secure your booking.**

**Signed ………………………**