

**GROUP BOOKING FORM**

**SHOALHAVEN SHOWGROUNDS**

Berry Nowra Milton

**Group Name:**

**Date of stay:**

**Total nights:**

**No. sites required:**

**No. Powered Sites:**

(Berry Powered sites only)

**No. Unpowered Sites:**

(Nowra & Milton Only)

**Self-contained:** (Berry only)

**Not Self-contained:** (Berry only)

**Requested sites:** (if any)

**Contact person details:**

**Name:**

**Address:**

**Phone/Mobile:**

**Email:**

**PLEASE EMAIL COMPLETED FORM TO**

[tourism@shoalhaven.com.au](mailto:tourism@shoalhaven.com.au) (02) 4421 0778

**Office use only**

Date Booked:

Booked by:

Itinerary Number:

Organiser contacted: YES/NO (please circle)