

HIDDEN ITALY & ICONIC HIGHLIGHTS

24 September – 17 October, 2026

Please complete details below for each person travelling, sign & return.

IMPORTANT INFORMATION (Please Read Carefully)

- **International Travellers** Please ensure the name you provide is exactly the same as it appears on your passport.

(Failure to provide correct information may result in additional administrative fees and/or cancellation of your reservation, for which MTA accepts no responsibility. Reinstatement of cancelled or amended bookings will be subject to availability and/or additional costs/fees).

YOUR CONTACT INFORMATION

Title Full Name

Date of birth

Address

City State Postcode

Phone Email

Is your postal address the same as above? ☐ Yes

Postal Address
(if different to above)

Dietary Requirements

Sondra Stewart - Mobile Travel Advisor

m: +61 422 193 590

e: ss Stewart@mtatravel.com.au or sondra@southaustraliadmc.com.au

w: mtatravel.com.au/ss Stewart or www.southaustraliadmc.com.au

Booking form



Medical Conditions

Special Requests

eg. Bedding Preference (Twin/double), Seating preference (if any), Other

Frequent Flyer numbers

	Airline	Member number
1		
2		
3		

EMERGENCY CONTACT

Full Name	<input type="text"/>	Relationship	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>

I agree my reservation is subject to MTA's Terms of Trade, Booking Conditions and Schedule of Fees. I understand Travel Insurance is available to cover me in most circumstances for cancellation penalties and this should be taken out at the time I pay my deposit.

Signature/s	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	

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