

SCAPE REFUND FORM

Please complete the following in English and in BLOCK CAPITALS

Customer Details

Property Name:	<input type="text"/>	Room Number:	<input type="text"/>
First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Email:	<input type="text"/>	Phone:	<input type="text"/>

Please complete Option A or Option B below by typing the information carefully. Incorrect information may delay the refund process.

OPTION A: AUSTRALIAN BANK ACCOUNT

Bank Name:	<input type="text"/>	Account Holders Name:	<input type="text"/>
BSB:	<input type="text"/>	Account Number:	<input type="text"/>

OPTION B: INTERNATIONAL BANK TRANSFER FEE

International bank fees may apply. *SWIFT code is a standard format of Bank Identifier Codes (BIC) and it is unique identification code for a particular bank. It is a minimum of 8 digits. Please contact your bank to obtain your SWIFT code..

Bank Name:	<input type="text"/>	Account Holders Name:	<input type="text"/>
Account Number:	<input type="text"/>	SWIFT/BIC*:	<input type="text"/>
IBAN: (European Bank Only)	<input type="text"/>	Bank Address:	<input type="text"/>
City:	<input type="text"/>	Country:	<input type="text"/>
Account Holders Address:	<input type="text"/>		

AUTHORISATION

Refunds will be processed within 30 days of receiving the form.

Customer Signature:	<input type="text"/>	Date:	<input type="text"/>
---------------------	----------------------	-------	----------------------

..... (OFFICE USE ONLY)

REFUND DETAILS (OFFICE USE ONLY)

Amount:	<input type="text"/>	Entry ID:	<input type="text"/>
Reason for Refund:	<input type="text"/>		

APPROVED BY

Managers Name:	<input type="text"/>	Date:	<input type="text"/>
Managers Signature:	<input type="text"/>		

scape