REQUEST FOR AIRPORT PICK-UP FORM



Student Details Full Name: Student ID: Email: Phone Number: Course: ☐ Sydney (NSW) Campus: ☐ Brisbane (QLD) Agent Name: (if applicable) **Arrival Details** Number of Luggage Bags: Flight Number: Arrival Date: Arrival Time: Airline Name: Airport Name: **Accommodation Details** Accommodation Venue: Name: Address: Phone Number: Mobile Number: WhatsApp/WeChat/Line ID: Email Adress: Special requests: (if any) Student ID: Name: Signature: Date:

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TEQSA Registered in the "Institute of Higher Education" category

OFFICE USE ONLY		
Receiving Officer:		
Signature of the Receiving Officer:	Date:	
Responsible Officer for pick-up:		
Signature of the Responsible Officer:	Date:	