



BREAKAWAY TRAVEL CLUB GOLD  
 ABN: 49 067 679 627 \*GOLD\*  
 LEVEL 1  
 123 CLARENCE STREET  
 SYDNEY NSW 2000  
 TEL 02 9250 9400 FAX 02 9250 9499

Tax Invoice - 29/01/10

BREAKAWAY TRAVEL CLUB GOLD  
 ABN: 49 067 679 627 \*GOLD\*  
 LEVEL 1  
 123 CLARENCE STREET  
 SYDNEY NSW 2000

Subject: VOUCHER  
 Booking file number: 363039620  
 Invoice number: 185936  
 Membership number: 15232599  
 Contact: MICHAEL

Itinerary	Start	End	Description	Person
SAHORO	05/02/10	10/02/10		D
SAHORO	05/02/10	10/02/10	Superior Triple Room U Occ 2	D
OBO AIRPORT TR	05/02/10		OBO AIRPORT TRANSFER	D

Pers.	First name	Surname	Membership fees	Cancellation fees	Package Price
D *	TANYA	RONEBERG	-		-

This is your receipt for monies paid and your statement for balance due.  
 This tour is at all times subject to our terms and conditions.  
 Balance is due normally 50 days prior to departure but may vary in accordance with airline ticketing regulations. In addition to deposit, we recommend immediate payment of airfare and taxes to secure the above package price.

Members and travel agents each acknowledge full understanding and acceptance of terms and conditions relating to the Club Med holiday.

Total price	-
Previously paid	-
Paid today	-
Outstanding amount	-
Balance due	-

ARRIVAL FLIGHT: JL1151 05FEB HND/OBO 09:20

TAXES : 5.46

IMPORTANT NOTE \* Passport validity and visas are the traveller's responsibility. Guests are advised to verify entry requirements with the appropriate government consulate or tourist board prior to departure. Please note that some countries require foreigners to hold a passport which is valid for at least SIX MONTHS from the date of arrival back into Australia. Club Med does not take responsibility for entry requirements.

**TRAVEL**

Check-in/Check-out time:

You are welcome to check in at the resort between 3 p.m. and 8 p.m. (or between 5 p.m. and 8 p.m. for short stays, weekends or outside the main arrival dates.) Dinner is included on the first day. You may have lunch on the first day at extra cost, depending on availability.

- The last day, you will need to check out by 10am and are required to leave the resort by 5pm. Breakfast and lunch are included.

**MISC/GENERAL**

DOCUMENTATION: Before documentation can be released it is a requirement that we receive complete passenger details. If you haven't already, please provide the following:

- Full name(s) as per passport or photo ID
- Client address
- Date(s) of birth
- Client contact telephone number

Please be advised a service fee will be charged on all credit card payments.

Because some of our ski villages are at high altitude, some skiers may be at risk of suffering from altitude sickness. Steps can be taken to reduce the effects suffered at high altitude. Please consult your medical practitioner before your departure should you have any concerns.

Please be advised that Japanese law requires us to obtain a photocopy of the passport identification page for all foreign travellers. For faster check-in, please bring this photocopy with you.



Subject                   VOUCHER  
Booking file number    363039620  
Invoice number         185936  
Membership number     15232599  
Contact                 MICHAEL

Tax Invoice - 29/01/10

We wish you a pleasant stay at Club Med Sahoro. For more information about your destination, please visit [www.clubmed.com.au](http://www.clubmed.com.au)

CLUB MED SAHORO

KARIKACHI KOGEN SHINTOKU-CHO

081 0039 KAMIKAWA-GUN - HOKKAIDO

Japan

Fax Reception (81) 1566 460 65

Telephone Reception (81) 1566 440 35