



Team Event Brief

| | | | |
|-------------------------|---------------------------|----------|--|
| Your Name | | | |
| Your Contact Number | () | ext no. | |
| Your email address | | | |
| | | | |
| Company Name | | | |
| Address | | | |
| | | | |
| State | | Postcode | |
| | | | |
| Experience Name | (if known) | | |
| Number of Participants | | | |
| Participant Information | Age Range: | | |
| | Male / Female mix: | | |
| | Staff/VIP Clients: | | |
| Experience Type | eg Action/Relaxed/Gourmet | | |
| Budget per person | | | |
| Preferred Location | | | |
| Preferred Experience/s | | | |
| | | | |
| Preferred Dates | | | |
| | | | |
| Any Additional Info | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Send you completed Team Event Brief to: *Email to: corporate@excapades.com.au or Fax to: (03) 9560 9822*



eXcapades Adventures & Gifts
 Po Box 657, Mulgrave VIC 3149
 Phone: 1300 765 688
www.excapades.com.au/corporate