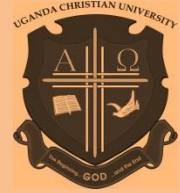


# GUEST APARTMENTS@UCU

## Booking Form

Email: [guesthouse@ucu.ac.ug](mailto:guesthouse@ucu.ac.ug)

Tel: +256 (0)312-350824



For Guest Lecturers/others remaining for more than one month.

### UCU Contact

Person Booking		Department	
Email address		Ext.	
Mobile #			

### Guest Details

Name	Home Country	Organization	Email	Mobile

### Purpose of Visit

Arrival Date		ARRIVAL TIME (est.)	
Departure Date			
Total Number Guests		Total Beds	
Need Airport Transport? <i>(Cost: 65,000/= each trip)</i>		Flight Details	

### Rental Costs per month

Room Type	No. of Flats	UCU	Private
2 Bedroom Flat*	2		

#### Rent includes:

- Furniture
- fully functional kitchen
- bedding
- towels
- internet connection
- start-up food and household supplies

#### Residents are responsible for:

- housekeeping,
- cooking fuel,
- electricity,
- all food costs.

UCU Guest House Email: [guesthouse@ucu.ac.ug](mailto:guesthouse@ucu.ac.ug), Tel no. 0312-350834

Start up Costs: \$200 per adult and \$100 per child under 18, in addition to the monthly rent. The Guest House will contact the Guest prior to their arrival in Uganda to verify the basic foods they wish to have available when they arrive. This food is included in the payment indicated above.

**Bill Payment**

How will the bill be paid?       Guest       UCU Department

I authorize the Bursar's Office to Debit Department Code \_\_\_\_\_ and credit Guest House code \_\_\_\_\_ to pay for this/these guest/guests.

Authorized Department Signature, Date & Stamp: \_\_\_\_\_

Bursar Signature & Date: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_

Official Use Only	
Accommodation provided in	<input type="checkbox"/> T7 <input type="checkbox"/> T8
From _____	to _____
Signature of Incharge Guest House _____	Date _____
Signature of Coordinator, Guest house _____	Date _____