



Skysurfers Redemption Form - Leisure and lifestyle

The following form should be completed when redeeming Skywards Miles for rewards with Arabian Adventures and Wild Wadi Water Park, signed by the parent/guardian and returned to Skysurfers by facsimile to the nearest service centre or by mail to P. O. Box 35436, Dubai, United Arab Emirates.

(Dubai +971 4 3167001, Karachi +9221 3521 2305, Manchester +44 1625 524 632, Melbourne +613 9654 3006, Mumbai +9122 2844 4670, New York +1 516 247 3527).

Personal details: (account from which Miles will be deducted)

Membership number: EK

Title: Master Mr Miss

First name: _____
(Please fill - in BLOCK CAPITAL letters)

Family name: _____

Reward details: Arabian Adventures

Skywards Miles to be redeemed:

Tour: _____ Date of excursion: ___ / ___ / ___ (DD/MM/YY) Pick up location: _____

Number of Adults: _____ Number of Children: _____ Total Guests: _____

*Arabian Adventures requires name of the child and details for verification of minors.

1. Name of child: _____ Date of birth: ___ / ___ / ___

2. Name of child: _____ Date of birth: ___ / ___ / ___

3. Name of child: _____ Date of birth: ___ / ___ / ___

4. Name of child: _____ Date of birth: ___ / ___ / ___

Contact name: _____ Dubai contact No.: _____

Reward details: _____

Reward details: Wild Wadi Water Park

Skywards Miles to be redeemed:

Number of vouchers:

Delivery options: Collect from Skywards desk Other: _____

*Tickets for Wild Wadi Water Park are valid for any day up to and including the expiry date as printed on the ticket. Please check your tickets for further details.

Parent/Guardian details:

Skywards number: EK

First name: _____
(Please fill - in BLOCK CAPITAL letters)

Family name: _____

Relationship to Applicant: _____

Date of birth: ___ / ___ / ___ (DD/MM/YY)

Telephone number: _____
(Please indicate country code and area code)

Email address: _____

Signature: _____

Date: _____

Please visit skysurfers.com for more details and for terms and conditions of the programme.