

BOOKING FORM

HOLIDAY DETAILS

I / we wish to book ____ place(s) on your holiday to _____ departing on ____ / ____ / ____.

Type of room preferred, enter the number of rooms required in the appropriate box

TWIN	<input type="text"/>
DOUBLE	<input type="text"/>
SINGLE	<input type="text"/>

Tick box if willing to share a twin room (single room supplement will be charged if sharer cannot be found)

PERSONAL DETAILS

Title	Preferred Name	Date of Birth	Address	Email / telephone no
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PASSPORT DETAILS

Full name as on Passport	Passport Number	Date of Issue	Expires on	Country of Issue	Nationality
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ADDITIONAL NOTES

If there are any other details, i.e. dietary or medical needs that you would like to advise us of regarding this booking, please write it in the box below

IF THIS IS THE FIRST TIME YOU ARE TRAVELLING WITH US, HOW DID YOU FIND US

Word of mouth, Internet search, Internet link, adverts in club newsletter etc.

Please enclose your deposit with this completed form to the address below.
Cheques should be made payable to **Mr. D Read**.

I confirm that I have read the terms and conditions and agree that any reservation will be subject to them

Signature _____ Date _____