

Booking Form

PLEASE USE BLOCK CAPITALS

Please return to: Isabel Morgan, 7 Kenton Mews, Henleaze, Bristol BS9 4LT England

Full Name:

Address:

Home Tel:

Day Tel:

Fax:

Email:

No of weeks required:

Arrival date:

Departure date:

Number of Adults:

No of Children:

Names of all party members – please give ages of children

1.

5.

2.

6.

3.

7.

4.

8.

I am authorised to make this booking on behalf of my party. I am over 18 years of age.

I enclose a non refundable booking deposit of £_____ being 30% of the total holiday cost. I agree to pay the balance of £_____ plus a returnable damage deposit of £300, 8 weeks before the start of the holiday. (If booking within 8 weeks of the holiday start date, full amount should be enclosed). Cheques are to be made out to 'Isabel Morgan'.

Note: It is advisable to arrange insurance against cancellation of your holiday.

Signature:

Date:

How did you hear about me?