

## HOLIDAY BOOKING FORM & CONFIRMATION

Please complete this booking form and return it to the I. Travel office SIGNED. Thank you very much.

### NAME AND ADDRESS OF PERSON MAKING THE BOOKING

FULL NAME Mr / Mrs / Miss / Ms

FULL ADDRESS & POSTCODE

E-MAIL:

FAX:

TEL: H:

W:

MOB:

### TYPE OF HOLIDAY

### TYPE OF ACCOMMODATION

### TRAVEL DETAILS

### VEHICLE DETAILS

Departure Date	Departure Time	Return Date	Return Time	Make Model	Reg	Height	Length

Roof Box Bike Rack

### NAMES OF ALL PERSONS TRAVELLING

NAME	DATE OF BIRTH	NAME	DATE OF BIRTH

### SPECIAL REQUESTS/ NOTES

### THE PRICE OF YOUR HOLIDAY & PAYMENT

### PRICE OF PACKAGE

**IT IS ESSENTIAL THAT YOU TAKE OUT ADEQUATE TRAVEL INSURANCE TO PROTECT YOU & YOUR HOLIDAY TRAVEL INSURANCE CAN BE PURCHASED AT YOUR LOCAL INSURANCE COMPANY**

**A copy of our terms and booking conditions is available on our website or at our office**

Please note that payments can be made by cheque made payable to Independent Travel Ltd, Cash, Debit card or Credit Card. Credit card transactions incur a charge of 3%.

For card payment, we require the card type & number, start & expiry date, issue & security number & card holder's name.

I, the undersigned, am over 18 years of age and authorised by the party detailed above to make the booking on their behalf. I have read and understood and accept the booking conditions. **I understand that deposits are NON REFUNDABLE.**

**Signature & Date**



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