

BOOKING FORM

Tour/Trip Title:

Departure Date Hotel

Price Deposit £70/£100/£200

Single Supplement Balance Due Date Due

Mr/Mrs/Ms	First Name	Last Name	Single	Twin	Double	Triple

Please note: Twin Room - 2 beds - Double Room - 1 bed

Address:

Tel No.

Address:

Tel No.

Deposit: Date paid:

Balance: Date paid:

Any special requests: Special diet/vegetarian/rooms etc.

**Free Holiday
 Joining Points**
 Kettlewells Yard, or:
 Retford, Worksop,
 Tuxford, Ordsall,
 Harworth.

Please specify any disabilities

Please state pick up point requested

Due to a change in package holiday regulations we are unable to sell personal travel insurance. However we strongly recommend you should take out an insurance policy for your holiday.

Please sign to confirm that you accept full responsibility for your own insurance
 I enclose a deposit to secure my reservation and agree to pay the balance of
 the cost no later than nine weeks before departure - No reminders will be sent

SIGNED for and on behalf of all persons included on this form

Call us on 01777 860360 or visit www.kettlewellscoaches.co.uk

Kettlewell (Retford) Limited, Grove Street, Retford, DN22 6LA