CHAPEL COTTAGE BOOKING FORM

This is NOT an on-line form. Please telephone (01788 810275) for availability first. Then PRINT OUT and post.

BLOCK CAPITALS PLEASE

ARRIVAL DAY & DATE:	approx time:
DEPARTURE DAY & DATE:	(4:00 pm earliest)
PARTY DETAILS Leader of party: (Mr/Mrs/Miss/other)	
Tel no (Home):Mobile N	lo:
Email:	
Address:	
Postco	ode:
Full names of <u>all</u> members of your party (include ages if und 1.	,
<u>2</u> .	
3.	
4.	
<u>5.</u>	
6.	
No of dogs:(£30 supplement if 3 or more dogs). A	
Please delete as appropriate:- I would like the top floor beds to be	e 2 singles / 1 double .
£ Total Cost	
£ Amount enclosed (£50 per week deposit	or full payment for short break).
£ Balance (please ensure balance is sent 6	weeks before your holiday commences).
Please make cheques payable to 'Chapel Cottage'.	
How did you hear about us? Internet – please specify Internet Site	
Recommendation Return Visit Ac	dvert in
DECLARATION I have read the 'Conditions of Letting' and agree to abide by	y them.
SIGNATURE:	Date:
Please return completed form to:	

Mrs Carolynn Thompson, Woolscott Manor, Woolscott, Nr Rugby, Warwickshire CV23 8DB