



GROUP BOOKING FORM

To ensure we have all the information about your group accommodation arrangements, please fill out the form below and include as much information as possible. If you have any further queries, please contact one of our team for advice.

DETAILS

Name:	
Institute:	
Department:	
Address: (Please include full postal address including zip/postal code)	
Telephone:	
E-mail: (please print)	
Address & Telephone number: (emergency only)	
Group leader's mobile number: (emergency only)	
Fax:	
Destination(s):	
Departure date:	
Return date:	
Total number of days:	

Total number of nights in Accommodation:	
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ACCOMMODATION

Accommodation option chosen:
Alternative accommodation option:
Full Board/Half Board:
Leader(s) room requirements:
Student(s) room requirements:
Dietary requirements:

GROUP

Total number of traveller(s):
Age (at time of travel)
Number of Male travellers:
Number of Female travellers:
Total number of paying students:
Total number of free leaders:
Total number of paying leaders:
Student Leaders
Total number of under 17 year old students:
Total number of over 18 year old students:

PAYMENT - I enclose one of the following:

DEPOSIT of: A 30% DEPOSIT OF THE TOTAL SUM IS REQUIRED

FINANCE OFFICE ORDER No.

Contact in Finance Office:

Contacts direct Telephone number:

Contacts E-mail address:

Address to send invoice:
(Please include full postal address, including
zip/post code)

Full tour amount:

ACCEPTANCE

I confirm that I have read and understood the Booking Conditions overleaf and I accept these terms and conditions on behalf of all members of the group.

Signed: _____

Print Name: _____

Date: _____