villaretreats
putting our heart into your holiday

BOOKING FORM

Your Booking Form must be completed in full to properly secure a booking

Guest Details

Lead Name: _____

Address: _____

_____

_____

Postcode: _____

Tel (daytime): _____

Tel (evening): _____

Mobile: _____

Email: _____

Fax: _____

Guest Names

Date of birth

1. _____ / _____
2. _____ / _____
3. _____ / _____
4. _____ / _____
5. _____ / _____
6. _____ / _____
7. _____ / _____
8. _____ / _____
9. _____ / _____
10. _____ / _____
11. _____ / _____
12. _____ / _____

Property Booking Details

Villa Number: _____

Location: _____

Rental date (from & to): _____

Departure Airport: _____

Arrival Airport: _____

Outbound Flight No: _____ Arrival time: _____

Inbound Flight No: _____ Departure time: _____

No. of persons: Adults: _____ Children: _____ Infants: _____

Villa Retreats strongly recommend that fully comprehensive travel insurance is taken at the time of booking.

Special requests: _____

_____

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Declaration

I have read and agree to the terms and conditions of booking this property on behalf of myself and all persons named on the booking form.

Name : _____

Signature : _____

Date : _____

Enclosed deposits

Property deposit (made payable to Villa Retreats): £

Total amount enclosed: £

Please debit £ _____ from my Visa/MasterCard/Switch/Delta account. I authorise the balance due to be debited from my account 10 weeks prior to departure ☐ (please tick)

An administration charge of 2% will be added to each credit card transaction (this does not apply to debit cards Switch, Delta etc.)

Cardholder name _____

Card expiry date _____ Switch Issue No _____ Switch Issue Date _____

Card number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

CVC No (3/4 digit number on back of card) : _____

Please write the billing address of the cardholder on a separate sheet of paper and attach it to this booking form if different to the above.

Signed: _____

Date: _____

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