Villa Retreats

BOOKING FORM

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

		Villa Retreats strongly recommend that fully comp	rehensive travel insurance is
Guest Details Lead Name:		taken at the time of booking.	
Address:		Special requests:	
Postcode:			
Tel (daytime):			
Tel (evening):			
Mobile:			
Email:			
Fax:			
Guest Names	Date of birth		
1	/		
2	/		
3	/		
4	/		
5	/	D estruction	
6	1	Declaration I have read and agree to the terms and conditions	of booking this property on
7.		behalf of myself and all persons named on the bool	
8.		Name :	
		Signature :	
9		Date :	
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:			

Personal information may be passed to the villa owner/management company to conform to local regulations

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