

# BOOKING FORM



## YOUR PERSONAL DETAILS

Group name .....

Mr  Mrs  Miss  Ms  Other .....

First name ..... Surname .....

Address .....

Postcode .....

Work telephone no. .... Home telephone no. ....

Mobile no. (in case we need to contact you on your departure day) .....

Email address .....

Do you check your email regularly?  Have you completed the back of this booking form?

## YOUR HOLIDAY DETAILS

Resort ..... Base holiday price (excluding flights) .....

Hotel ..... No. of paying passengers .....

Arrival date in resort ..... No. of free places (7 night group bookings) .....

No. of nights in resort ..... Total no. of passengers .....

Room requirements (please indicate number of rooms required in each box)

Double (one bed)  Twin (two single beds)  Single

Triple (three separate beds)  Four bedded  Other .....

## TRAVEL

Self drive  Own flights (please supply full details below)  Flights booked by Ski 2

## OUTBOUND

Outbound date (eg 01/04/11) .....

Departure airport from UK ..... Departure time ..... Flight number .....

Arrival airport in Italy ..... Arrival time ..... Airline .....

## RETURN

Inbound date (eg 01/04/11) .....

Departure airport from Italy ..... Departure time ..... Flight number .....

Arrival airport in UK ..... Arrival time ..... Airline .....

I enclose a non refundable/non transferable deposit of £130 per paying passenger (plus the cost of flights if Ski 2 is booking these on my behalf) to secure the above mentioned places. I have read and understand the booking conditions and as the leader of my party, I am eligible to sign on behalf of individual members. I confirm that unless indicated overleaf all the members of my party have adequate wintersports insurance in place for the duration of this holiday.

I enclose a cheque  I have paid by BACS  I will call with my credit/debit card details

I understand that balance payments will be due 70 days prior to departure. If I do not cancel the holiday outside of this period, I will be liable for the balance payment whether I travel or not.

Signed ..... Date .....

Additional comments/special requests/dietary requirements .....

