

Tyrolean Adventures Limited Booking Form

It is important that you read the 'Terms and Conditions' BEFORE submitting this booking form. A copy is available upon request. Please ensure that you sign this booking form, your booking will not be accepted without a signature.

Please fill in this form and return it with your payment to:

Tyrolean Adventures Limited, 33 Ingra Walk, Roborough, Plymouth PL6 7DF Tel 07779 764858
tyroleanadventures@hotmail.co.uk Lloyds Bank TSB, sort code 309951 account 02723086 (please indicate name as reference)

PLEASE NOTE: THE GROUP LEADER IS RESPONSIBLE FOR COLLECTING PAYMENTS FROM ALL MEMBERS LISTED ON THIS FORM AND ENSURING THEY ARE PAID ON TIME WITH A SINGLE CHEQUE, INDIVIDUAL PAYMENTS FROM GROUP MEMBERS WILL NOT BE ACCEPTED AND ALL RATES ARE CALCULATED FOR 7 NIGHTS 6 FULL DAYS SKIING OTHER BOOKINGS WILL BE QUOTED UPON REQUEST.

Lead name of Group/Family.

Forename:	Surname:
Address:	
Daytime tel no:	Evening tel no:
E-mail address:	

Holiday resort:	Hotel Name:
From (date):	To (date):

Group/Family Details. Please provide the age of any child 15 years and under. Please use one form per apartment required.

Title	Name	Surname	DOB*	Cost
TOTAL				€

TRAVEL COSTS (reduction of flight supplement £100pp)	€
OWN SKI EQUIPMENT (complete)	€
SUB TOTAL	€
AIRPORT TRANSFERS	€
SINGLE ROOM SUPPLEMENT	€
ROOM UPGRADE TO SUITE	€
SUPPLEMENTARY SKI PASS	€
TOTAL COST	€
€10 (£100) DEPOSIT*** of total cost payable on booking (this is non refundable per person)	€
TOTAL ENCLOSED Please make cheques payable to Tyrolean Adventures Limited	€ ****

*Age of child on holiday return date.

**Payment to be made in full if booking made less than 6 weeks before date of commencement of holiday.

***or £100 per person non refundable deposit.

****please contact Tyrolean Adventures Limited for their fixed exchange rate available from October 2009

Please fill in your travel requirements. Delete all those that do not apply.

Self Drive	Coach	Airport Transfer
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Coach pick up point

Please consider accommodation check in times when making your travel arrangements.

OUTBOUND	RETURN
DATE:	DATE:
UK DEPARTURE AIRPORT:	EUROPEAN DEPARTURE AIRPORT:
UK TAKE OFF TIME:	FLIGHT NUMBER:
FLIGHT NUMBER:	FLIGHT TAKE OFF TIME:
EUROPEAN ARRIVAL AIRPORT:	CHECK IN DESK CLOSURE TIME:
FLIGHT ARRIVAL TIME:	UK ARRIVAL AIRPORT:
NUMBER OF PASSENGERS:	
MOBILE CONTACT NUMBER:	

<p>Important! I have read and accept the Terms and Conditions, and the above important information and I will advise all other passengers travelling as part of this reservation of these conditions.</p>
<p>Signed:</p>
<p>Date:</p>

<p>Special Requests Please use the space below to let us know of any special requests</p>
<p>N.B: the above cannot be guaranteed and do not form part of our contract with you</p>